

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

SECRETARY OF THE SENATE

14 MAY 22 PM 3:56

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.

12FE4M5

FRIENDS OF CHRIS MCDANIEL

ADDRESS (number and street)

POST OFFICE BOX 125



Check if different than previously reported. (ACC)

LAUREL

MS

39441

- 2.
- FEC IDENTIFICATION NUMBER ▼**

C C00550657

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

MS

00

- 4.
- TYPE OF REPORT**
- (Choose One)

- (a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

- (b) 12-Day
- PRE**
- Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY
06 / 03 / 2014

in the State of

MS

- (c) 30-Day
- POST**
- Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY
04 / 01 / 2014

through

MM / DD / YYYY
05 / 14 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer DAWN WALTERSSignature of Treasurer DAWN WALTERS

Date

MM / DD / YYYY
05 / 22 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

FRIENDS OF CHRIS MCDANIEL

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2014

To:

MM / DD / YYYY
05 / 14 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	302885.87	1165152.59
(b) Total Contribution Refunds (from Line 20(d)) ..	355.00	355.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	302530.87	1164797.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	530752.91	1026954.44
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	530752.91	1026954.44
8. Cash on Hand at Close of Reporting Period (from Line 27)...	237943.15	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...	100100.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

FRIENDS OF CHRIS MCDANIEL

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2014

To:

MM / DD / YYYY
05 / 14 / 2014

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)...

165208.00

692580.35

(ii) Unitemized.....

128842.87

421009.24

(iii) TOTAL of contributions
from individuals

294050.87

1113589.59

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees
(such as PACs)...

8835.00

51563.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

302885.87

1165152.59

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate...

0.00

100100.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

100100.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

302885.87

1265252.59

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 238

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...

530752.91

1026954.44

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES ..

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate...

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b))...

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees...

355.00

355.00

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees
(such as PACs)...

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c))...

355.00

355.00

21. OTHER DISBURSEMENTS ...

0.00

0.00

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ►

531107.91

1027309.44

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...

466165.19

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...

302885.87

25. SUBTOTAL (add Line 23 and Line 24)...

769051.06

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...

531107.91

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25)...

237943.15

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 5 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. A-1 AUTO REPAIR AND TOW SERVICE		Date of Receipt MM / DD / YYYY 04 / 25 / 2014	
Mailing Address PO BOX 655		Transaction ID : SA11AI.26375	
City WINNEMUCCA	State NV	Zip Code 89446	Amount of Each Receipt this Period 35.00 SEE ATTRIBUTION MEMO
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 35.00		

Full Name (Last, First, Middle Initial) B. JOSEPH ABBOTT		Date of Receipt MM / DD / YYYY 05 / 05 / 2014	
Mailing Address 1036 ABBOTT LANE		Transaction ID : SA11AI.26715	
City SUMMIT	State MS	Zip Code 39666	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. ROBERT ABRAMS		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address P.O. BOX 659		Transaction ID : SA11AI.27200	
City NORTH SALEM	State NY	Zip Code 10560-0659	Amount of Each Receipt this Period 200.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer ABEVILLE PRESS	Occupation BOOK PUBLISHER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

SUBTOTAL of Receipts This Page (optional).....	735.00
TOTAL This Period (last page this line number only).....	

14020400336

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 6 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) LAWRENCE ACKERMAN			Date of Receipt MM / DD / YYYY 04 / 12 / 2014	
Mailing Address 30015 WILLOW CT S City FARMINGTON HILLS State MI Zip Code 48331-2295			Transaction ID : SA11AI.25150	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00	
Name of Employer SELF-EMPLOYED		Occupation COMPUTER PROGRAMMER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) WILLIAM E ADAMS			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address PO BOX 1 City PORTERSVILLE State PA Zip Code 16051			Transaction ID : SA11AI.27279	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer ADAMS MANUFACTURING		Occupation MANUFACTURER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) DAVID ALLEN			Date of Receipt MM / DD / YYYY 04 / 03 / 2014	
Mailing Address 409 BRUMBAUGH RD City OCEAN SPRINGS State MS Zip Code 39564-5302			Transaction ID : SA11AI.24296	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00	
Name of Employer ASRC FEDERAL		Occupation ENGINEER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
SUBTOTAL of Receipts This Page (optional).....			850.00	
TOTAL This Period (last page this line number only).....				

14020400337

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 7 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. HAROLD ALLEN		Date of Receipt 04 / 08 / 2014	
Mailing Address 713 WAKEFIELD CT		Transaction ID : SA11AI.24891	
City EL PASO	State TX	Zip Code 79922-2127	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF-EMPLOYED	Occupation INVESTOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
Full Name (Last, First, Middle Initial) B. JERRY ALLISON		Date of Receipt 05 / 14 / 2014	
Mailing Address 1651 FAWN BLUFF		Transaction ID : SA11AI.26980	
City SAN ANTONIO	State TX	Zip Code 78248-1580	Amount of Each Receipt this Period 100.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
Full Name (Last, First, Middle Initial) C. DUANE ALTON		Date of Receipt 04 / 24 / 2014	
Mailing Address 712 N LANCASHIRE LN		Transaction ID : SA11AI.26246	
City LIBERTY LAKE	State WA	Zip Code 99019-8531	Amount of Each Receipt this Period 250.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1075.00		
SUBTOTAL of Receipts This Page (optional).....		600.00	
TOTAL This Period (last page this line number only).....			

14020400338

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 8 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MARY JO M ANDERSON

Mailing Address **7 OXFORD SQ RD**

City TUPELO	State MS	Zip Code 38801-6191
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
---	---

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
04 / 23 / 2014

Transaction ID : **SA11AI.26019**

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
ERNEST ANGELO

Mailing Address **410 NORTH MAIN STREET**

City MIDLAND	State TX	Zip Code 79701-4710
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation PETROLEUM ENGINEER
---	---

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27170**

Amount of Each Receipt this Period

1000.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
JIM ANTOSH

Mailing Address **200 E. FEDERAL**

City SHAWNEE	State OK	Zip Code 74804
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation BUSINESSMAN
--	----------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

04 / 26 / 2014

Transaction ID : **SA11AI.26453**

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 9 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. ROBERT ARNOTT			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 620 NEWPORT CENTER DRIVE, SUITE 90			Transaction ID : SA11AI.27348	
City NEWPORT BEACH	State CA	Zip Code 92660-8038		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2600.00	
Name of Employer RESEARCH AFFILIATES		Occupation INVESTMENTS		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
Full Name (Last, First, Middle Initial) B. ROBERT ARNOTT			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 620 NEWPORT CENTER DRIVE, SUITE 90			Transaction ID : SA11AI.27349	
City NEWPORT BEACH	State CA	Zip Code 92660-8038		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2600.00	
Name of Employer RESEARCH AFFILIATES		Occupation INVESTMENTS		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		
Full Name (Last, First, Middle Initial) C. DONALD AYRES			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 355 BRISTOL STREET SUITE A			Transaction ID : SA11AI.27120	
City COSTA MESA	State CA	Zip Code 92626-7968		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF	EARMARKED THROUGH CLUB FOR GROWTH	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional).....			6200.00	
TOTAL This Period (last page this line number only).....				

14020400340

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

FRANK BAIO

A.

Mailing Address 1810 W 7TH ST

City

BROOKLYN

State

NY

Zip Code

11223

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

05 / 02 / 2014

Transaction ID : SA11AI.29831

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MR CHARLES RICHARD BARGE

B.

Mailing Address PO BOX 72

City

MACON

State

MS

Zip Code

39341

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

04 / 15 / 2014

Transaction ID : SA11AI.28432

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JOSEPH T BARNETT

C.

Mailing Address PO BOX 193

City

PALOS VERDES

State

CA

Zip Code

90274

FEC ID number of contributing
federal political committee.

C

Name of Employer

BARNETT & CO.

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

04 / 16 / 2014

Transaction ID : SA11AI.25339

Amount of Each Receipt this Period

1000.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

14020400341

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 11 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

<p>Full Name (Last, First, Middle Initial) WALTER R BARRY</p> <p>Mailing Address 2690 GALE ROAD</p> <p>City WAYZATA State MN Zip Code 55391-2626</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RETIRED Occupation RETIRED</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 1000.00</p>		<p>Date of Receipt 04 / 24 / 2014</p> <p>Transaction ID : SA11AI.26250</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>EARMARKED THROUGH CLUB FOR GROWTH</p>
<p>Full Name (Last, First, Middle Initial) ANTHONY BARTLETT</p> <p>Mailing Address 164 ASHLAND PT</p> <p>City HENDERSONVILLE State TN Zip Code 37075-5544</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 500.00</p>		<p>Date of Receipt 04 / 01 / 2014</p> <p>Transaction ID : SA11AI.24204</p> <p>Amount of Each Receipt this Period 100.00</p> <p>EARMARKED THROUGH SENATE CONSERVATIVES FUND</p>
<p>Full Name (Last, First, Middle Initial) ANTHONY BARTLETT</p> <p>Mailing Address 164 ASHLAND PT</p> <p>City HENDERSONVILLE State TN Zip Code 37075-5544</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 600.00</p>		<p>Date of Receipt 04 / 02 / 2014</p> <p>Transaction ID : SA11AI.27535</p> <p>Amount of Each Receipt this Period 100.00</p> <p>SELF</p>
<p>SUBTOTAL of Receipts This Page (optional).....</p> <p>TOTAL This Period (last page this line number only).....</p>		<p>1200.00</p>

14020400342

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 12 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ANTHONY BARTLETT

Mailing Address **164 ASHLAND PT**

City **HENDERSONVILLE** State **TN** Zip Code **37075-5544**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **SELF-EMPLOYED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt **04 / 24 / 2014**

Transaction ID : **SA11AI.26266**

Amount of Each Receipt this Period **100.00**

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
MR WILLIAM BASSETT

Mailing Address **110 LONGWOOD DR**

City **BRANDON** State **MS** Zip Code **39042**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **04 / 04 / 2014**

Transaction ID : **SA11AI.27816**

Amount of Each Receipt this Period **500.00**

C. Full Name (Last, First, Middle Initial)
JO ANN BAUGHMAN

Mailing Address **PO BOX 1269**

City **PHILOMATH** State **OR** Zip Code **97370-1269**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt **04 / 08 / 2014**

Transaction ID : **SA11AI.24851**

Amount of Each Receipt this Period **58.00**

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

658.00

14020400343

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 13 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. BRUCE BAUMGARN			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2404 NORTHEAST PARK DRIVE			Transaction ID : SA11AI.27011	
City GRIMES	State IA	Zip Code 50111-4839	Amount of Each Receipt this Period 1000.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer SELF-EMPLOYED		Occupation MANAGEMENT CONSULTANT/ PRIVATE EQ		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1250.00		
Full Name (Last, First, Middle Initial) B. HARRY BEARDSLEY			Date of Receipt MM / DD / YYYY 04 / 05 / 2014	
Mailing Address PO BOX 8457			Transaction ID : SA11AI.24422	
City WARNER ROBINS	State GA	Zip Code 31095-8457	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer NGC		Occupation MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
Full Name (Last, First, Middle Initial) C. ROSE MARY BEDDINGFIELD			Date of Receipt MM / DD / YYYY 04 / 09 / 2014	
Mailing Address 708 SUMMERGLEN DRIVE			Transaction ID : SA11AI.24951	
City COLLEGE STATION	State TX	Zip Code 77840-2333	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C				
Name of Employer HOMEMAKER		Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 210.00		
SUBTOTAL of Receipts This Page (optional).....			1125.00	
TOTAL This Period (last page this line number only).....				

14020400344

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

<p>Full Name (Last, First, Middle Initial) ROSE MARY BEDDINGFIELD</p>			<p>Date of Receipt MM / DD / YYYY 05 / 14 / 2014</p>	
<p>Mailing Address 708 SUMMERGLEN DRIVE</p>			<p>Transaction ID : SA11AI.26935</p>	
<p>City COLLEGE STATION</p>	<p>State TX</p>	<p>Zip Code 77840-2333</p>	<p>Amount of Each Receipt this Period 25.00 EARMARKED THROUGH CLUB FOR GROWTH</p>	
<p>FEC ID number of contributing federal political committee. C</p>				
<p>Name of Employer HOMEMAKER</p>		<p>Occupation HOMEMAKER</p>		
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 235.00</p>		
<p>Full Name (Last, First, Middle Initial) DAVID BENEDICT</p>			<p>Date of Receipt MM / DD / YYYY 05 / 14 / 2014</p>	
<p>Mailing Address 2860 COUNTRY DRIVE APT. 218</p>			<p>Transaction ID : SA11AI.27118</p>	
<p>City FREMONT</p>	<p>State CA</p>	<p>Zip Code 94536-5372</p>	<p>Amount of Each Receipt this Period 500.00 EARMARKED THROUGH CLUB FOR GROWTH</p>	
<p>FEC ID number of contributing federal political committee. C</p>				
<p>Name of Employer INFORMATION REQUESTED PER BEST EFF</p>		<p>Occupation INFORMATION REQUESTED PER BEST EFF</p>		
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 500.00</p>		
<p>Full Name (Last, First, Middle Initial) JANE BENEKE</p>			<p>Date of Receipt MM / DD / YYYY 05 / 14 / 2014</p>	
<p>Mailing Address 4201 ARMSTRONG PKWY</p>			<p>Transaction ID : SA11AI.27116</p>	
<p>City DALLAS</p>	<p>State TX</p>	<p>Zip Code 75205-3715</p>	<p>Amount of Each Receipt this Period 500.00 EARMARKED THROUGH CLUB FOR GROWTH</p>	
<p>FEC ID number of contributing federal political committee. C</p>				
<p>Name of Employer HOMEMAKER</p>		<p>Occupation HOMEMAKER</p>		
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 500.00</p>		
<p>SUBTOTAL of Receipts This Page (optional).....</p>			<p>1025.00</p>	
<p>TOTAL This Period (last page this line number only).....</p>				

14020400345

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 15 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
KAREN H BIGLANE

Mailing Address 1310 HOMEWOOD DR.

City LAUREL	State MS	Zip Code 39440-2260
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
---	---

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
04 / 23 / 2014

Transaction ID : **SA11AI.26021**

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
WILLIAM BILLINGSLEY

Mailing Address 569 N. OLD CANTON RD

City MADISON	State MS	Zip Code 39110
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
---	---

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
04 / 23 / 2014

Transaction ID : **SA11AI.26069**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
BRAD BIRDWELL

Mailing Address 17630 LAJKE CYPRESS HILL DR.

City CYPRESS	State TX	Zip Code 77429
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CONTRACTOR	Occupation CONTRACTOR
---------------------------------------	---------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
04 / 23 / 2014

Transaction ID : **SA11AI.31109**

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

14020400346

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 16 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CARL BLACKEDGE

Mailing Address **1866 COUNTY ROAD 8**

City LAUREL	State MS	Zip Code 39443
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
---	---

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
04 / 23 / 2014

Transaction ID : **SA11AI.26023**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOSEPH BLACKSTON

Mailing Address **226 GRAYHAWK DRIVE**

City MADISON	State MS	Zip Code 39110
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
--	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
201.00

Date of Receipt
04 / 22 / 2014

Transaction ID : **SA11AI.25965**

Amount of Each Receipt this Period
201.00

C. Full Name (Last, First, Middle Initial)
JIM BLACKWELL

Mailing Address **12519 WESTMERE DR**

City HOUSTON	State TX	Zip Code 77077-3927
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer EXXONMOBIL	Occupation GEOPHYSICIST
---------------------------------------	-----------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
536.00

Date of Receipt
04 / 01 / 2014

Transaction ID : **SA11AI.23706**

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

726.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 17 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JIM BLACKWELL

Mailing Address **12519 WESTMERE DR**

City HOUSTON	State TX	Zip Code 77077-3927
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer EXXONMOBIL	Occupation GEOPHYSICIST
---------------------------------------	-----------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
561.00

Date of Receipt
04 / 08 / 2014

Transaction ID : **SA11AI.24641**

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
JIM BLACKWELL

Mailing Address **12519 WESTMERE DR**

City HOUSTON	State TX	Zip Code 77077-3927
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer EXXONMOBIL	Occupation GEOPHYSICIST
---------------------------------------	-----------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
661.00

Date of Receipt
05 / 13 / 2014

Transaction ID : **SA11AI.26890**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

C. Full Name (Last, First, Middle Initial)
ROBERT A BLACKWELL

Mailing Address **60 CARLOS DR**

City ELLISVILLE	State MS	Zip Code 39437
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
---	---

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
05 / 01 / 2014

Transaction ID : **SA11AI.26640**

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

425.00

14020400348

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
GEB BLUM
Mailing Address 11063D S. MEMORIAL DRIVE, PMB 431
City TULSA State OK Zip Code 74133-7366
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation MD
Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date 300.00
Date of Receipt 05 / 01 / 2014
Transaction ID : SA11AI.26593
Amount of Each Receipt this Period 100.00
EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
CAROL BOGOSIAN
Mailing Address 105 MARLAND RD S
City COLORADO SPRINGS State CO Zip Code 80906-4350
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTOR
Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date 2500.00
Date of Receipt 04 / 01 / 2014
Transaction ID : SA11AI.24213
Amount of Each Receipt this Period 1000.00
EARMARKED THROUGH SENATE CONSERVATIVES FUND

C. Full Name (Last, First, Middle Initial)
CAROL BOGOSIAN
Mailing Address 105 MARLAND RD S
City COLORADO SPRINGS State CO Zip Code 80906-4350
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTOR
Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)
Election Cycle-to-Date 3400.00
Date of Receipt 04 / 08 / 2014
Transaction ID : SA11AI.31192
Amount of Each Receipt this Period 900.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

14020400349

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 19 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. CAROL BOGOSIAN		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 105 MARLAND RD S		Transaction ID : SA11AI.31194
City COLORADO SPRINGS	State CO	Zip Code 80906-4350
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF-EMPLOYED	Occupation PRIVATE INVESTOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

Full Name (Last, First, Middle Initial) B. CAROL BOGOSIAN		Date of Receipt MM / DD / YYYY 04 / 17 / 2014
Mailing Address 105 MARLAND RD S		Transaction ID : SA11AI.28682
City COLORADO SPRINGS	State CO	Zip Code 80906-4350
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF-EMPLOYED	Occupation PRIVATE INVESTOR	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4500.00	

Full Name (Last, First, Middle Initial) C. MARTIN BOLES		Date of Receipt MM / DD / YYYY 05 / 14 / 2014
Mailing Address 333 SOUTH HOPE STREET SUITE 3000		Transaction ID : SA11AI.27004
City LOS ANGELES	State CA	Zip Code 90071-3039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer KIRKLAND & ELLIS	Occupation LAWYER	EARMARKED THROUGH CLUB FOR GROWTH
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1600.00
TOTAL This Period (last page this line number only).....	

14020400350

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 20 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) MARTIN BOLES		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 333 SOUTH HOPE STREET SUITE 3000		Transaction ID : SA11AI.27316	
City LOS ANGELES	State CA	Zip Code 90071-3039	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer KIRKLAND & ELLIS		Occupation LAWYER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1250.00	
EARMARKED THROUGH CLUB FOR GROWTH			

Full Name (Last, First, Middle Initial) JOEL BOMGAR		Date of Receipt MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 357 KIOWA DR.		Transaction ID : SA11AI.25307	
City MADISON	State MS	Zip Code 39110	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00	
Name of Employer BOMGAR CORPORATION		Occupation ENTREPRENEUR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) LOIS E BOOTH		Date of Receipt MM / DD / YYYY 04 / 14 / 2014	
Mailing Address PO BOX 389		Transaction ID : SA11AI.25208	
City AULT	State CO	Zip Code 80610	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 21 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

ANITA BOYD

A. Mailing Address 1 VISTA TRAMONTO

City State Zip Code
NEWPORT COAST CA 92657-1402

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

04 / 13 / 2014

Transaction ID : SA11AI.25170

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

HAROLD BRASHEARS

B. Mailing Address 1801 FAIRWAY DR

City State Zip Code
GAUTIER MS 39553

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 23 / 2014

Transaction ID : SA11AI.26062

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

WADE BREAZEAL

C. Mailing Address PO BOX 328

City State Zip Code
ETHEL MS 39067-0328

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

04 / 12 / 2014

Transaction ID : SA11AI.25148

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 238

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

MR CHARLES E BRETT

A.

Mailing Address 31 BRETT RIDGE RD

City

LAUREL

State

MS

Zip Code

39443

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

04 / 25 / 2014

Transaction ID : SA11AI.29376

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

ROBINSON BROWN III

B.

Mailing Address 3600 WOODSIDE ROAD

City

LOUISVILLE

State

KY

Zip Code

40222

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 09 / 2014

Transaction ID : SA11AI.25008

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ELIZABETH BRYDEN

C.

Mailing Address 1 WEST 67TH STREET APT. 611

City

NEW YORK

State

NY

Zip Code

10023-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.26996

Amount of Each Receipt this Period

105.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

655.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 23 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) JAMES BUELL			Date of Receipt MM / DD / YYYY 05 / 01 / 2014	
A. Mailing Address 4790 CAUGHLIN PARK WAY #518			Transaction ID : SA11AI.26611	
City RENO	State NV	Zip Code 89509	Amount of Each Receipt this Period 2600.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer SELF-EMPLOYED		Occupation FARMER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) JAMES BUELL			Date of Receipt MM / DD / YYYY 05 / 01 / 2014	
B. Mailing Address 4790 CAUGHLIN PARK WAY #518			Transaction ID : SA11AI.26612	
City RENO	State NV	Zip Code 89509	Amount of Each Receipt this Period 2600.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer SELF-EMPLOYED		Occupation FARMER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) GROVER BURNS			Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
C. Mailing Address 310 LAKE FOREST DR			Transaction ID : SA11AI.31139	
City FREDERICKSBURG	State VA	Zip Code 22406	Amount of Each Receipt this Period 250.00 DENTIST	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....			5450.00	
TOTAL This Period (last page this line number only).....				

14020400354

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JEFFERY BURNS

Mailing Address **18 STONEWALL**

City **HATTIESBURG** State **MA** Zip Code **39402**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) _____

Election Cycle-to-Date
800.00

Date of Receipt

04 / 23 / 2014

Transaction ID : **SA11AI.26025**

Amount of Each Receipt this Period

800.00

B. Full Name (Last, First, Middle Initial)
JOHN BUTLER

Mailing Address **1005 AUGUSTA AVENUE**

City **WAUSAU** State **WI** Zip Code **54403-3340**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) _____

Election Cycle-to-Date
500.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27203**

Amount of Each Receipt this Period

500.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
TOM CAIRNS

Mailing Address **PO BOX 44009**

City **LEMON COVE** State **CA** Zip Code **93244-0009**

FEC ID number of contributing federal political committee. **C**

Name of Employer
SIERRA CHIEF

Occupation
OWNER

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify) _____

Election Cycle-to-Date
250.00

Date of Receipt

04 / 14 / 2014

Transaction ID : **SA11AI.25200**

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1550.00

14020400355

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 25 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) EARL CALDWELL			Date of Receipt MM / DD / YYYY 05 / 13 / 2014	
Mailing Address 172 N PLAZA CT			Transaction ID : SA11AI.26909	
City MT PLEASANT	State SC	Zip Code 29464-6301		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 200.00	
Name of Employer APR			Occupation CFO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 600.00	
B. Full Name (Last, First, Middle Initial) ROBERT CAMPANARO			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2607 CHESTERFIELD AVE.			Transaction ID : SA11AI.27351	
City BALTIMORE	State MD	Zip Code 21213-1106		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2600.00	
Name of Employer RETIRED			Occupation MANAGEMENT ANALYST	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 2600.00	
C. Full Name (Last, First, Middle Initial) CON CAMPBELL			Date of Receipt MM / DD / YYYY 05 / 13 / 2014	
Mailing Address PO BOX 337			Transaction ID : SA11AI.26918	
City ASHKUM	State IL	Zip Code 60911-0337		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED			Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 500.00	
SUBTOTAL of Receipts This Page (optional)			3300.00	
TOTAL This Period (last page this line number only)				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15
 PAGE 26 OF 238

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JAMES CANON

Mailing Address **PO BOX 9221**

City **WICHITA** State **KS** Zip Code **67277-0221**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
04 / 01 / 2014

Transaction ID : **SA11AI.24109**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
JOYCE P CARACCI

Mailing Address **5018 RIVERWOOD CIR**

City **JACKSON** State **MS** Zip Code **39211**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
04 / 14 / 2014

Transaction ID : **SA11AI.25264**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
HENRY CARLSON

Mailing Address **9101 E. MADISON ST.**

City **SIOUX FALLS** State **SD** Zip Code **57110-7463**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
05 / 14 / 2014

Transaction ID : **SA11AI.27244**

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2025.00

14020400357

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MISS MARY A CASSARD

Mailing Address 2720 WHITNEY PL APT 402

City	State	Zip Code
METAIRIE	LA	70002

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00

Date of Receipt
MM / DD / YYYY
04 / 21 / 2014

Transaction ID : SA11AI.28987

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MISS MARY A CASSARD

Mailing Address 2720 WHITNEY PL APT 402

City	State	Zip Code
METAIRIE	LA	70002

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00

Date of Receipt
MM / DD / YYYY
04 / 22 / 2014

Transaction ID : SA11AI.29043

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS MARTHA R CASTEEL

Mailing Address 62511 LOCUST RD

City	State	Zip Code
SOUTH BEND	IN	46614

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2014

Transaction ID : SA11AI.29833

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1000.00

14020400358

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

MR JAMES FRANCIS CAUSLEY Jr

A. Mailing Address 3333 GULF SHORE BLVD N APT V10

City State Zip Code
NAPLES FL 34103

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify):

Election Cycle-to-Date

500.00

Date of Receipt

04 / 23 / 2014

Transaction ID : SA11AI.29258

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

GAIL CHEEK

B. Mailing Address 4210 N US HIGHWAY 259

City State Zip Code
BROKEN BOW OK 74728-6500

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify):

Election Cycle-to-Date

225.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.24855

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

JOHN W CHILDS

C. Mailing Address 165 SAGO PALM ROAD

City State Zip Code
VERO BEACH FL 32963

FEC ID number of contributing
federal political committee.

C

Name of Employer
J.W CHILDS ASSOCIATES

Occupation
CHAIRMAN / CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify):

Election Cycle-to-Date

2600.00

Date of Receipt

04 / 24 / 2014

Transaction ID : SA11AI.26220

Amount of Each Receipt this Period

2600.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 29 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) RICHARD CLAMPITT		Date of Receipt MM / DD / YYYY 04 / 08 / 2014	
A. Mailing Address 7261 ASHINGTON DR		Transaction ID : SA11AI.24856	
City DALLAS	State TX	Zip Code 75225-1704	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RED RIVER PAPER	Occupation BUSINESS MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) KATHERINE CLARK		Date of Receipt MM / DD / YYYY 04 / 08 / 2014	
B. Mailing Address 9145 SCOTCH RIDGE RD		Transaction ID : SA11AI.24854	
City BOWLING GREEN	State OH	Zip Code 43402-9581	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 232.00		

Full Name (Last, First, Middle Initial) KIRK A CLARK		Date of Receipt MM / DD / YYYY 04 / 14 / 2014	
C. Mailing Address PO BOX 938		Transaction ID : SA11AI.25210	
City MCALLEN	State TX	Zip Code 78505-0938	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....		450.00	
TOTAL This Period (last page this line number only).....			

14020400360

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH
Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY
04 / 17 / 2014

Transaction ID : SA11AI.31177

Amount of Each Receipt this Period

731.25

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH
Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY
04 / 17 / 2014

Transaction ID : SA11AI.31178

Amount of Each Receipt this Period

2600.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH
Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY
04 / 24 / 2014

Transaction ID : SA11AI.31173

Amount of Each Receipt this Period

3590.93

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 31 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 2001 L ST NE STE 600			Transaction ID : SA11AI.31174	
City WASHINGTON	State DC	Zip Code 20036	Amount of Each Receipt this Period 3275.00	
FEC ID number of contributing federal political committee. C C90009945			TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]	
Name of Employer		Occupation	Election Cycle-to-Date	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[]		
Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 2001 L ST NE STE 600			Transaction ID : SA11AI.31175	
City WASHINGTON	State DC	Zip Code 20036	Amount of Each Receipt this Period 1530.00	
FEC ID number of contributing federal political committee. C C90009945			TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]	
Name of Employer		Occupation	Election Cycle-to-Date	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[]		
Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 2001 L ST NE STE 600			Transaction ID : SA11AI.31176	
City WASHINGTON	State DC	Zip Code 20036	Amount of Each Receipt this Period 1009.13	
FEC ID number of contributing federal political committee. C C90009945			TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]	
Name of Employer		Occupation	Election Cycle-to-Date	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[]		
SUBTOTAL of Receipts This Page (optional).....			0.00	
TOTAL This Period (last page this line number only).....			[]	

14020400362

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH
Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY
05 / 01 / 2014

Transaction ID : SA11AI.31171

Amount of Each Receipt this Period

6875.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH
Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY
05 / 01 / 2014

Transaction ID : SA11AI.31172

Amount of Each Receipt this Period

5187.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH
Mailing Address 2001 L ST NE STE 600

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY
05 / 14 / 2014

Transaction ID : SA11AI.31169

Amount of Each Receipt this Period

520.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 33 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) CLUB FOR GROWTH		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2001 L ST NE STE 600		Transaction ID : SA11AI.31170	
City WASHINGTON	State DC	Zip Code 20036	
FEC ID number of contributing federal political committee. C C90009945		Amount of Each Receipt this Period 1365.00	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
B. Full Name (Last, First, Middle Initial) CLUB FOR GROWTH		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2001 L ST NE STE 600		Transaction ID : SA11AI.31179	
City WASHINGTON	State DC	Zip Code 20036	
FEC ID number of contributing federal political committee. C C90009945		Amount of Each Receipt this Period 1808.63	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
C. Full Name (Last, First, Middle Initial) CLUB FOR GROWTH		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2001 L ST NE STE 600		Transaction ID : SA11AI.31180	
City WASHINGTON	State DC	Zip Code 20036	
FEC ID number of contributing federal political committee. C C90009945		Amount of Each Receipt this Period 20.00	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		
SUBTOTAL of Receipts This Page (optional).....		0.00	
TOTAL This Period (last page this line number only).....		0.00	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 34 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
A. Mailing Address 2001 L ST NE STE 600			Transaction ID : SA11AI.31181	
City	State	Zip Code		
WASHINGTON	DC	20036		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 848.25	
C C90009945				
Name of Employer		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 102403.00	[MEMO ITEM]	
Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
B. Mailing Address 2001 L ST NE STE 600			Transaction ID : SA11AI.31182	
City	State	Zip Code		
WASHINGTON	DC	20036		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 6120.00	
C C90009945				
Name of Employer		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]	
Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
C. Mailing Address 2001 L ST NE STE 600			Transaction ID : SA11AI.31183	
City	State	Zip Code		
WASHINGTON	DC	20036		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 3550.00	
C C90009945				
Name of Employer		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]	
SUBTOTAL of Receipts This Page (optional).....			0.00	
TOTAL This Period (last page this line number only).....				

14020400365

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 35 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
05 / 14 / 2014

Transaction ID : SA11AI.31184

Amount of Each Receipt this Period
2838.23

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
05 / 14 / 2014

Transaction ID : SA11AI.31185

Amount of Each Receipt this Period
2754.38

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CLUB FOR GROWTH

Mailing Address 2001 L ST NE STE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C90009945

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
05 / 14 / 2014

Transaction ID : SA11AI.31186

Amount of Each Receipt this Period
170.63

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020400366

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 238

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2001 L ST NE STE 600			Transaction ID : SA11AI.31187	
City	State	Zip Code		
WASHINGTON	DC	20036		
FEC ID number of contributing federal political committee.		C C90009945	Amount of Each Receipt this Period 14835.00	
Name of Employer		Occupation	TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date		
B. Full Name (Last, First, Middle Initial) CLUB FOR GROWTH			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2001 L ST NE STE 600			Transaction ID : SA11AI.31188	
City	State	Zip Code		
WASHINGTON	DC	20036		
FEC ID number of contributing federal political committee.		C C90009945	Amount of Each Receipt this Period 11095.50	
Name of Employer		Occupation	TOTAL EARMARKED THROUGH THIS CONDUIT. PAC LIMIT NOT AFFECTED [MEMO ITEM]	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date		
C. Full Name (Last, First, Middle Initial) CHARLES COHN			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 9936 VILLA GRANITO LANE			Transaction ID : SA11AI.27174	
City	State	Zip Code		
GRANITE BAY	CA	95746-6482		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00	
Name of Employer WELLS FARGO ADVISORS		Occupation FINANCIAL ADVISOR	EARMARKED THROUGH CLUB FOR GROWTH	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00		
SUBTOTAL of Receipts This Page (optional).....			250.00	
TOTAL This Period (last page this line number only).....			250.00	

14020400367

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

<p>Full Name (Last, First, Middle Initial) RICHARD CONRAD</p>			<p>Date of Receipt MM / DD / YYYY 04 / 24 / 2014</p>		
<p>Mailing Address P.O. BOX 4164</p>			<p>Transaction ID : SA11AI.26338</p>		
City LAUREL	State MS	Zip Code 39441	<p>Amount of Each Receipt this Period 500.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 500.00</p>			
<p>Name of Employer SANDERSON FARMS</p>		<p>Occupation STAFF AUDITOR</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 1500.00</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>Full Name (Last, First, Middle Initial) WILLIAM COOK</p>			<p>Date of Receipt MM / DD / YYYY 05 / 14 / 2014</p>		
<p>Mailing Address 28431 ROCHESTER COURT</p>			<p>Transaction ID : SA11AI.27296</p>		
City BONITA SPRINGS	State FL	Zip Code 34135-3454	<p>Amount of Each Receipt this Period 500.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 500.00</p>			
<p>Name of Employer RETIRED</p>		<p>Occupation RETIRED</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 1000.00</p>		<p>Amount of Each Receipt this Period 500.00</p>	
<p>Full Name (Last, First, Middle Initial) RODNEY E COOLEY</p>			<p>Date of Receipt MM / DD / YYYY 05 / 13 / 2014</p>		
<p>Mailing Address 289 STAGEHAND DR</p>			<p>Transaction ID : SA11AI.30077</p>		
City SAN JOSE	State CA	Zip Code 95111	<p>Amount of Each Receipt this Period 100.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>Amount of Each Receipt this Period 100.00</p>			
<p>Name of Employer</p>		<p>Occupation</p>		<p>Amount of Each Receipt this Period 100.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 300.00</p>		<p>Amount of Each Receipt this Period 100.00</p>	
<p>SUBTOTAL of Receipts This Page (optional).....</p>			<p>1100.00</p>		
<p>TOTAL This Period (last page this line number only).....</p>			<p>1100.00</p>		

14020400368

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 38 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) HOWARD COOPER			Date of Receipt MM / DD / YYYY 04 / 14 / 2014	
Mailing Address PO BOX 962			Transaction ID : SA11AI.25196	
City RICHLAND	State WA	Zip Code 99352-0962		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) SAMUEL COPELL			Date of Receipt MM / DD / YYYY 04 / 11 / 2014	
Mailing Address 885 TAMPA DR			Transaction ID : SA11AI.25094	
City GREENVILLE	State MS	Zip Code 38701-8046		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00	
Name of Employer USG		Occupation MFG MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
C. Full Name (Last, First, Middle Initial) PATRICIA COSTON			Date of Receipt MM / DD / YYYY 04 / 08 / 2014	
Mailing Address 5869 S 76TH EAST AVE			Transaction ID : SA11AI.24895	
City TULSA	State OK	Zip Code 74145-9324		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer OILFIELD IMPROVEMENTS, INC		Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....			850.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 39 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) JOE CRAIL			Date of Receipt MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 2172 DUPONT DR STE 230			Transaction ID : SA11AI.24217	
City IRVINE	State CA	Zip Code 92612-1359	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH SENATE CONSERVATIVES FUND	
Name of Employer WESTERN MUTUAL		Occupation EXEC		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 4600.00		
Full Name (Last, First, Middle Initial) REX B DAHLBERG			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 8455 ESTRELLA RD			Transaction ID : SA11AI.26215	
City SAN MIGUEL	State CA	Zip Code 93451-9542	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer R B DAHLBERG ENTERPRISES		Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
Full Name (Last, First, Middle Initial) EDDIE DAIGLE			Date of Receipt MM / DD / YYYY 04 / 25 / 2014	
Mailing Address PO BOX 1725			Transaction ID : SA11AI.23612	
City CLINTON	State MS	Zip Code 39060	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			DAIGLE ENTERPRISES,LP [MEMO ITEM]	
Name of Employer DAIGLE ENTERPRISES, LP		Occupation INSURANCE AGENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 100.00		
SUBTOTAL of Receipts This Page (optional)			1500.00	
TOTAL This Period (last page this line number only)				

14020400370

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

WENDY DALTON

A.

Mailing Address **714 CAMELOT LN**

City

HOUSTON

State

TX

Zip Code

77024-5509

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

05 / 13 / 2014

Transaction ID : **SA11AI.26912**

Amount of Each Receipt this Period

250.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

DEWAYNE DARBY

B.

Mailing Address **1321 LAUREL HILLS CIRCLE**

City

JEFFERSON CITY

State

TN

Zip Code

37760

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 23 / 2014

Transaction ID : **SA11AI.31084**

Amount of Each Receipt this Period

250.00

PHYSICIAN

Full Name (Last, First, Middle Initial)

JOSEPH DELAHANTY

C.

Mailing Address **P.O. BOX 7540**

City

ARLINGTON

State

VA

Zip Code

22207-0540

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27122**

Amount of Each Receipt this Period

300.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

800.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 41 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) MR. DONALD DOUGLASS		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 150 EDGEWATER WAY		Transaction ID : SA11AI.27094	
City MERRITT ISLAND	State FL	Zip Code 32953-8347	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		
B. Full Name (Last, First, Middle Initial) JAMES DOWNEY		Date of Receipt MM / DD / YYYY 04 / 14 / 2014	
Mailing Address 26000 NEW BRIDGE DRIVE		Transaction ID : SA11AI.25204	
City LOS ALTOS HILLS	State CA	Zip Code 94022-2631	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer ALTOS SONOMA CORP	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300.00		
C. Full Name (Last, First, Middle Initial) JAMES DOWNEY		Date of Receipt MM / DD / YYYY 04 / 17 / 2014	
Mailing Address 26000 NEW BRIDGE DRIVE		Transaction ID : SA11AI.28779	
City LOS ALTOS HILLS	State CA	Zip Code 94022-2631	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer ALTOS SONOMA CORP	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1800.00		
SUBTOTAL of Receipts This Page (optional)		900.00	
TOTAL This Period (last page this line number only)			

14020400372

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 42 OF 238	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) JAMES DOWNEY		Date of Receipt MM / DD / YYYY 04 / 29 / 2014	
Mailing Address 26000 NEW BRIDGE DRIVE		Transaction ID : SA11AI.29508	
City LOS ALTOS HILLS	State CA	Zip Code 94022-2631	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer ALTOS SONOMA CORP	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) JAMES DOWNEY		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 26000 NEW BRIDGE DRIVE		Transaction ID : SA11AI.27201	
City LOS ALTOS HILLS	State CA	Zip Code 94022-2631	Amount of Each Receipt this Period 500.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer ALTOS SONOMA CORP	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) WALLACE DOWNEY		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 1000 THORNIDGE COURT		Transaction ID : SA11AI.27114	
City ARGYLE	State TX	Zip Code 76226-2532	Amount of Each Receipt this Period 500.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer DOWNEY PUBLISHING	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line number only)		

14020400373

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

<p>Full Name (Last, First, Middle Initial) DAVID DOYLE</p>			<p>Date of Receipt MM / DD / YYYY 04 / 23 / 2014</p>		
<p>A. Mailing Address 1243 EAGLES FLIGHT WAY</p>			<p>Transaction ID : SA11AI.25978</p>		
City NORTH PORT	State FL	Zip Code 34287-4407	<p>Amount of Each Receipt this Period 100.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>EARMARKED THROUGH SENATE CONSERVATIVES FUND</p>			
<p>Name of Employer RETIRED</p>		<p>Occupation RETIRED</p>		<p>Amount of Each Receipt this Period 100.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 300.00</p>		<p>EARMARKED THROUGH SENATE CONSERVATIVES FUND</p>	
<p>Full Name (Last, First, Middle Initial) DAVID DOYLE</p>			<p>Date of Receipt MM / DD / YYYY 05 / 13 / 2014</p>		
<p>B. Mailing Address 1243 EAGLES FLIGHT WAY</p>			<p>Transaction ID : SA11AI.26899</p>		
City NORTH PORT	State FL	Zip Code 34287-4407	<p>Amount of Each Receipt this Period 100.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>EARMARKED THROUGH SENATE CONSERVATIVES FUND</p>			
<p>Name of Employer RETIRED</p>		<p>Occupation RETIRED</p>		<p>Amount of Each Receipt this Period 100.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 400.00</p>		<p>EARMARKED THROUGH SENATE CONSERVATIVES FUND</p>	
<p>Full Name (Last, First, Middle Initial) JAMES T DUDLEY</p>			<p>Date of Receipt MM / DD / YYYY 04 / 23 / 2014</p>		
<p>C. Mailing Address 31 HEATHERWOOD DR</p>			<p>Transaction ID : SA11AI.26017</p>		
City LAUREL	State MS	Zip Code 39440	<p>Amount of Each Receipt this Period 250.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>		<p>EARMARKED THROUGH SENATE CONSERVATIVES FUND</p>			
<p>Name of Employer INFORMATION REQUESTED PER BEST EFF</p>		<p>Occupation INFORMATION REQUESTED PER BEST EFF</p>		<p>Amount of Each Receipt this Period 250.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 250.00</p>		<p>EARMARKED THROUGH SENATE CONSERVATIVES FUND</p>	
<p>SUBTOTAL of Receipts This Page (optional).....</p>			<p>450.00</p>		
<p>TOTAL This Period (last page this line number only).....</p>			<p></p>		

14020400374

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
DENNIS DUNN

Mailing Address **4817 LAKE WASHINGTON BLVD NE APT 3**

City KIRKLAND	State WA	Zip Code 98033-7648
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation AUTHOR
--	-----------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
05 / 13 / 2014

Transaction ID : **SA11AI.26869**

Amount of Each Receipt this Period
50.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
JOAN DUPONT

Mailing Address **303 HULLS FARM ROAD**

City SOUTHPORT	State CT	Zip Code 06890-3002
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
501.00

Date of Receipt
05 / 14 / 2014

Transaction ID : **SA11AI.27171**

Amount of Each Receipt this Period
201.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
WILLIAM EASLEY

Mailing Address **105 STRACHAN LN**

City ST SIMONS ISLAND	State GA	Zip Code 31522-5149
---------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
04 / 08 / 2014

Transaction ID : **SA11AI.24888**

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

401.00

14020400375

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

ROGER EASTERLING

A.

Mailing Address 9673 HWY 42

City
RIGHTON

State
MS

Zip Code
39476

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

04 / 24 / 2014

Transaction ID : SA11AI.26337

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

CHRISTOPHER EKSTROM

B.

Mailing Address 1525 NW 121ST DR.

City

CORN SPRINGS

State
FL

Zip Code
33071

FEC ID number of contributing
federal political committee.

C

Name of Employer
EKSTROM PROPERTIES

Occupation
PRINCIPAL

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.27305

Amount of Each Receipt this Period

1500.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

MARK ELLIOTT

C.

Mailing Address 105 MYSTIC CT

City

SIMPSONVILLE

State
SC

Zip Code
29681-5791

FEC ID number of contributing
federal political committee.

C

Name of Employer
JACOBS

Occupation
ENGINEER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

212.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.24710

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1775.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 46 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) MARTY ELLIS			Date of Receipt MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 7976 SADDLE RIDGE TRCE			Transaction ID : SA11A1.24206	
City NASHVILLE	State TN	Zip Code 37221-1023	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		EARMARKED THROUGH SENATE CONSERVATIVES FUND		
Name of Employer CONCERT MERCHANDISE COMPANY		Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 225.00		
B. Full Name (Last, First, Middle Initial) LINDA ELLISON			Date of Receipt MM / DD / YYYY 04 / 29 / 2014	
Mailing Address 853 97TH AVE SE			Transaction ID : SA11A1.26512	
City BELLEVUE	State WA	Zip Code 98004-6752	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		EARMARKED THROUGH SENATE CONSERVATIVES FUND		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 325.00		
C. Full Name (Last, First, Middle Initial) JUDITH ENFIELD			Date of Receipt MM / DD / YYYY 05 / 13 / 2014	
Mailing Address 4227 NANCY PL			Transaction ID : SA11A1.26856	
City SHOREVIEW	State MN	Zip Code 55126-6413	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		EARMARKED THROUGH SENATE CONSERVATIVES FUND		
Name of Employer VALERE, LLC		Occupation PART TIME PROGRAMMER ANALYST		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 235.00		
SUBTOTAL of Receipts This Page (optional).....			385.00	
TOTAL This Period (last page this line number only).....				

14020400377

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 47 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) CEFERINO FAJARDO		Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
Mailing Address 14735 VIA BETTONA		Transaction ID : SA11AI.30821	
City SAN DIEGO	State CA	Zip Code 92127	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer CEFERINO FAJARO JR. CPA	Occupation ACCOUNTANT	SELF-EMPLOYED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) JAMES FARR		Date of Receipt MM / DD / YYYY 05 / 05 / 2014	
Mailing Address 1209 N PITT ST APT 2A		Transaction ID : SA11AI.26687	
City ALEXANDRIA	State VA	Zip Code 22314-1479	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer SUNESYS, LLC	Occupation VP OF HR	EARMARKED THROUGH SENATE CONSERVATIVES FUND	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) A. FEIGE		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 1000 NW 134TH STREET		Transaction ID : SA11AI.27255	
City SEATTLE	State WA	Zip Code 98177-4120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	EARMARKED THROUGH CLUB FOR GROWTH	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

14020400378

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 48 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) FORREST FOLEY			Date of Receipt MM / DD / YYYY 04 / 14 / 2014	
Mailing Address 1512 CAFE DUMONDE			Transaction ID : SA11AI.25198	
City CONROE	State TX	Zip Code 77304-4931	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00	
Name of Employer SELF-EMPLOYED		Occupation LAWYER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) DUANE FOWLER			Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
Mailing Address P. O. BOX 50081			Transaction ID : SA11AI.31128	
City AUSTIN	State TX	Zip Code 78763	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) MS ELEANOR J FOX			Date of Receipt MM / DD / YYYY 04 / 29 / 2014	
Mailing Address 13572 PINE VILLA LN			Transaction ID : SA11AI.29501	
City FORT MYERS	State FL	Zip Code 33912	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2600.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		
SUBTOTAL of Receipts This Page (optional).....			3100.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 238

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR RICHARD L FRANCIS

Mailing Address **PO BOX 540580**

City **OMAHA** State **NE** Zip Code **68154**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **WRITER**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt

MM	DD	YYYY
04	08	2014

Transaction ID : SA11AI.27971

Amount of Each Receipt this Period

400.00

B. Full Name (Last, First, Middle Initial)
MR RICHARD L FRANCIS

Mailing Address **PO BOX 540580**

City **OMAHA** State **NE** Zip Code **68154**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **WRITER**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt

MM	DD	YYYY
04	30	2014

Transaction ID : SA11AI.29717

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)
CONNIE FREGALLAS

Mailing Address **PO BOX 655**

City **WINNEMUCCA** State **NV** Zip Code **89449**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **35.00**

Date of Receipt

MM	DD	YYYY
04	25	2014

Transaction ID : SA11AI.23614

Amount of Each Receipt this Period

35.00

A-1 AUTO REPAIR AND TOW SERVICE

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

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14020400380

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 50 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
FOSTER FRIESS

Mailing Address **PO BOX 9790**

City **JACKSON** State **WY** Zip Code **83002**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER BEST EFF

Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
04 / 24 / 2014

Transaction ID : **SA11AI.26312**

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
ROBERT FULLER Jr

Mailing Address **10 10TH ST APT 11B**

City **ATLANTIC BEACH** State **FL** Zip Code **32233**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
04 / 23 / 2014

Transaction ID : **SA11AI.29292**

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
DARYL GAMBRELL

Mailing Address **171 COUNTY ROAD 713**

City **STRINGER** State **MS** Zip Code **39481**

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
04 / 24 / 2014

Transaction ID : **SA11AI.26359**

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
IRVIN H. GATLIN

A. Mailing Address **3159 HIGHWAY 84 E.**

City State Zip Code
LAUREL MS 39443-6107

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

04 / 14 / 2014

Transaction ID : **SA11AI.25225**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
GERARD R GIBERT

B. Mailing Address **PO BOX 1020**

City State Zip Code
RIDGELAND MS 39158

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

04 / 24 / 2014

Transaction ID : **SA11AI.26310**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)
WARREN GOLDMAN

C. Mailing Address **1273 NORTH AVENUE UNIT 5G5**

City State Zip Code
NEW ROCHELLE NY 10804-7336

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

04 / 16 / 2014

Transaction ID : **SA11AI.25331**

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CLYDE R. GOODWIN

Mailing Address **1095 SWAMP LANE**

City **HAZLEHURST** State **MS** Zip Code **39083**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
04 / 29 / 2014

Transaction ID : **SA11AI.29509**

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)
CLYDE R. GOODWIN

Mailing Address **1095 SWAMP LANE**

City **HAZLEHURST** State **MS** Zip Code **39083**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

05 / 13 / 2014

Transaction ID : **SA11AI.30069**

Amount of Each Receipt this Period

50.00

C. Full Name (Last, First, Middle Initial)
FREDERICK GRAMLICH

Mailing Address **5210 BURKE DR**

City **ALEXANDRIA** State **VA** Zip Code **22309-3309**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

04 / 17 / 2014

Transaction ID : **SA11AI.25407**

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

150.00

14020400383

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 238

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) DAVID GRAY		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
A. Mailing Address 721 MARKET STREET		Transaction ID : SA11AI.27091	
City LEWISBURG	State PA	Zip Code 17837-1453	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
Full Name (Last, First, Middle Initial) WILLIAM TRIMBLE GREEN		Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
B. Mailing Address PO BOX 2097		Transaction ID : SA11AI.26298	
City LAUREL	State MS	Zip Code 39442	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
Full Name (Last, First, Middle Initial) WILLIAM TRIMBLE GREEN		Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
C. Mailing Address PO BOX 2097		Transaction ID : SA11AI.26303	
City LAUREL	State MS	Zip Code 39442	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00		
SUBTOTAL of Receipts This Page (optional).....		400.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. CHARLES GREGG			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 14 / 2014</div> </div>	
Mailing Address 950 MARKHAM WOODS ROAD			Transaction ID : SA11AI.27155	
City LONGWOOD	State FL	Zip Code 32779-2824	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div> EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer GREATER PROPERTIES, INC.	Occupation PRESIDENT			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">450.00</div>			
Full Name (Last, First, Middle Initial) B. RICHARD GRIFFITH			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 02 / 2014</div> </div>	
Mailing Address 3417 MILAM ST			Transaction ID : SA11AI.27705	
City HOUSTON	State TX	Zip Code 77002-9531	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>	
FEC ID number of contributing federal political committee. C				
Name of Employer RICHARD S GRIFFITH	Occupation INVESTOR			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">450.00</div>			
Full Name (Last, First, Middle Initial) C. RICHARD GRIFFITH			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 17 / 2014</div> </div>	
Mailing Address 3417 MILAM ST			Transaction ID : SA11AI.28977	
City HOUSTON	State TX	Zip Code 77002-9531	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>	
FEC ID number of contributing federal political committee. C				
Name of Employer RICHARD S GRIFFITH	Occupation INVESTOR			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">700.00</div>			
SUBTOTAL of Receipts This Page (optional)			<div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>	
TOTAL This Period (last page this line number only)			<div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
RICHARD GRIFFITH

A. Mailing Address **3417 MILAM ST**

City State Zip Code
HOUSTON TX 77002-9531

FEC ID number of contributing
federal political committee.

C

Name of Employer
RICHARD S GRIFFITH

Occupation
INVESTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

04 / 22 / 2014

Transaction ID : **SA11AI.29188**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)
MR RICHARD S GRIFFITH

B. Mailing Address **PO BOX 91610**

City State Zip Code
LAFAYETTE LA 70509

FEC ID number of contributing
federal political committee.

C

Name of Employer
RICHARD GRIFFITH

Occupation
INVESTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 29 / 2014

Transaction ID : **SA11AI.29597**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
RICHARD GRIFFITH

C. Mailing Address **3417 MILAM ST**

City State Zip Code
HOUSTON TX 77002-9531

FEC ID number of contributing
federal political committee.

C

Name of Employer
RICHARD S GRIFFITH

Occupation
INVESTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1050.00

Date of Receipt

05 / 07 / 2014

Transaction ID : **SA11AI.29972**

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) RICHARD GRIFFITH			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 3417 MILAM ST			Transaction ID : SA11AI.27131	
City HOUSTON	State TX	Zip Code 77002-9531	Amount of Each Receipt this Period 250.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer RICHARD S GRIFFITH		Occupation INVESTER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1300.00		
B. Full Name (Last, First, Middle Initial) MR HUBBY GRINER			Date of Receipt MM / DD / YYYY 04 / 09 / 2014	
Mailing Address PO BOX 825			Transaction ID : SA11AI.28167	
City COLUMBIA	State MS	Zip Code 39429	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) GLEN HAAS			Date of Receipt MM / DD / YYYY 04 / 08 / 2014	
Mailing Address 880 OPEN SKY CT			Transaction ID : SA11AI.24857	
City ALLEN	State TX	Zip Code 75013-5533	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer ARAGIO SOLUTIONS		Occupation ENGINEER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....			600.00	
TOTAL This Period (last page this line number only).....				

14020400387

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 57 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) PAUL R HAMILTON		Date of Receipt MM / DD / YYYY 04 / 16 / 2014	
Mailing Address 413 W CREEK ST		Transaction ID : SA11AI.25341	
City FREDERICKSBURG	State TX	Zip Code 78624	Amount of Each Receipt this Period 250.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) RUTH M HAMMERMAN		Date of Receipt MM / DD / YYYY 04 / 17 / 2014	
Mailing Address 804 SANDERSON RD		Transaction ID : SA11AI.25430	
City MANTACHIE	State MS	Zip Code 38855	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer BEST EFFORTS INFORMATION REQUESTED	Occupation BEST EFFORTS INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 360.00		

Full Name (Last, First, Middle Initial) LEE HANLEY		Date of Receipt MM / DD / YYYY 04 / 11 / 2014	
Mailing Address 250 JUNGLE RD		Transaction ID : SA11AI.25099	
City PALM BEACH	State FL	Zip Code 33480-4812	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer LEXINGTON MGT	Occupation MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2950.00

14020400388

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 58 OF 238

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
LEE HANLEY

Mailing Address **250 JUNGLE RD**

City **PALM BEACH** State **FL** Zip Code **33480-4812**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LEXINGTON MGT** Occupation **MANAGER**

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

04 / 11 / 2014

Transaction ID : **SA11AI.30583**

Amount of Each Receipt this Period

2600.00

B. Full Name (Last, First, Middle Initial)
R BYRON HILL

Mailing Address **54 WATTS RD**

City **PICAYUBE** State **MS** Zip Code **39466**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

04 / 14 / 2014

Transaction ID : **SA11AI.25252**

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
JANE HILLMAN

Mailing Address **63 ORCHARD ROAD**

City **ORINDA** State **CA** Zip Code **94563-3443**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27209**

Amount of Each Receipt this Period

500.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3350.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
LEE M. HOLMES

Mailing Address **PO BOX AR**

City **HAGATNA** State **GU** Zip Code **96932-7564**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOUTHERN MEDIA, INC** Occupation **MANAGER**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **1362.00**

Date of Receipt
04 / 01 / 2014

Transaction ID : **SA11AI.24216**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
MR EARL HOLT III

Mailing Address **1703 CLARENDON ST**

City **LONGVIEW** State **TX** Zip Code **75601**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
04 / 01 / 2014

Transaction ID : **SA11AI.27479**

Amount of Each Receipt this Period
500.00

INFORMATION REQUESTED

C. Full Name (Last, First, Middle Initial)
WILLIAM HOTALING

Mailing Address **125 QUASSAICK AVE**

City **NEW WINDSOR** State **NY** Zip Code **12553-6635**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
04 / 08 / 2014

Transaction ID : **SA11AI.24858**

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

14020400390

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
WILLIAM HOTALING

Mailing Address **125 QUASSAICK AVE**

City **NEW WINDSOR** State **NY** Zip Code **12553-6635**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
05 / 13 / 2014

Transaction ID : **SA11AI.26910**

Amount of Each Receipt this Period
200.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
STEVEN HOWELL

Mailing Address **1836 NORFOLK ST**

City **HOUSTON** State **TX** Zip Code **77098-4306**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
05 / 13 / 2014

Transaction ID : **SA11AI.26902**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

C. Full Name (Last, First, Middle Initial)
PAT HUETTER

Mailing Address **716 VENTANA CIR**

City **MESQUITE** State **NV** Zip Code **89027-3301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
05 / 13 / 2014

Transaction ID : **SA11AI.26858**

Amount of Each Receipt this Period
40.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

340.00

14020400391

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 61 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SAMUEL HUFFINES

Mailing Address **2805 WATERSIDE DR**

City PLANO	State TX	Zip Code 75093-8806
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HUFFINES AUTO DEALERSHIPS	Occupation AUTO DEALER
--	----------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
04 / 24 / 2014

Transaction ID : **SA11AI.26245**

Amount of Each Receipt this Period
1000.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
CONDON HUGHES

Mailing Address **1216 56TH STREET**

City MERIDIAN	State MS	Zip Code 39305-1400
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
--	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
04 / 09 / 2014

Transaction ID : **SA11AI.28148**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
CONDON HUGHES

Mailing Address **1216 56TH STREET**

City MERIDIAN	State MS	Zip Code 39305-1400
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
--	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
04 / 29 / 2014

Transaction ID : **SA11AI.29562**

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

14020400392

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 62 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) PETER HUMPHRIS			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 14 MANASSAS DRIVE			Transaction ID : SA11AI.27205	
City TOMS RIVER	State NJ	Zip Code 08757-5807	Amount of Each Receipt this Period 240.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 290.00		

Full Name (Last, First, Middle Initial) RODNEY A. HUNT			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 971 LLAKEWOOD DRIVE ST DOMINICS MEDICAL OFFICE BUILDIN			Transaction ID : SA11AI.26313	
City JACKSON	State MS	Zip Code 39216	Amount of Each Receipt this Period 470.00	
FEC ID number of contributing federal political committee. C				
Name of Employer SELF-EMPLOYEEED		Occupation ORAL SURGEON		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) F. HUTCHINSON			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 255 PARTRIDGE BND			Transaction ID : SA11AI.26240	
City POWELL	State OH	Zip Code 43065-8730	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

810.00

14020400393

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 238

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
PETER JENKINSON

Mailing Address **3775 STONEGLEN N**

City **RICHMOND** State **CA** Zip Code **94806-1832**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LIBERTY GYMNASTICS** Occupation **GYMNASTICS COACH**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **216.00**

Date of Receipt
04 / 26 / 2014

Transaction ID : **SA11AI.26442**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
ARVID JENSEN

Mailing Address **214 FISHPOND ROAD**

City **KELSO** State **WA** Zip Code **98626-9631**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
05 / 14 / 2014

Transaction ID : **SA11AI.27108**

Amount of Each Receipt this Period
200.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
MARY C. JENSEN

Mailing Address **315 FRONT BEACH DRIVE**

City **OCEAN SPRINGS** State **MS** Zip Code **39564**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
04 / 16 / 2014

Transaction ID : **SA11AI.25332**

Amount of Each Receipt this Period
150.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

375.00

14020400394

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 64 OF 238

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
CHARLES JOHNSON
Mailing Address **19 SAINT ANDREWS DR**

City State Zip Code
JACKSON MS 39211

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCGOWAN WORKING PARTNERS INC

Occupation
GEOLOGIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1441.00

Date of Receipt

05 / 05 / 2014

Transaction ID : **SA11AI.26704**

Amount of Each Receipt this Period

50.00

B. Full Name (Last, First, Middle Initial)
JIM JOHNSON
Mailing Address **PO BOX 1144**

City State Zip Code
TROY MT 59935-1144

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHLOR RID

Occupation
MARKETING

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1087.00

Date of Receipt

04 / 08 / 2014

Transaction ID : **SA11AI.24890**

Amount of Each Receipt this Period

200.00

C. Full Name (Last, First, Middle Initial)
MERRITT JOHNSON
Mailing Address **812 LIME ST.**

City State Zip Code
OCEAN SPRINGS MS 39564

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
LANDLORD

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1150.00

Date of Receipt

04 / 24 / 2014

Transaction ID : **SA11AI.26363**

Amount of Each Receipt this Period

650.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

14020400395

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 65 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
DAVID JOHNSTON

A. Mailing Address **PO BOX 1457**

City State Zip Code
TULARE CA 93275-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
JAS

Occupation
PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

04 / 16 / 2014

Transaction ID : **SA11AI.25349**

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)
DAVID JOHNSTON

Mailing Address **PO BOX 1457**

City State Zip Code
TULARE CA 93275-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
JAS

Occupation
PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

386.00

Date of Receipt

04 / 25 / 2014

Transaction ID : **SA11AI.26407**

Amount of Each Receipt this Period

161.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

C. Full Name (Last, First, Middle Initial)
DAVID JOHNSTON

Mailing Address **PO BOX 1457**

City State Zip Code
TULARE CA 93275-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
JAS

Occupation
PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

486.00

Date of Receipt

05 / 13 / 2014

Transaction ID : **SA11AI.26903**

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

286.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 66 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) MS J HEATHER JOHNSTON		Date of Receipt MM / DD / YYYY 04 / 17 / 2014	
Mailing Address 57 COTTER ST		Transaction ID : SA11AI.28773	
City SAN FRANCISCO	State CA	Zip Code 94112	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) JAMES M JONES		Date of Receipt MM / DD / YYYY 04 / 14 / 2014	
Mailing Address PO BOX 1506		Transaction ID : SA11AI.25254	
City PICAYUNE	State MS	Zip Code 39466	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) ROBERT JONES		Date of Receipt MM / DD / YYYY 04 / 08 / 2014	
Mailing Address 13415 KENT ST		Transaction ID : SA11AI.24859	
City NAPLES	State FL	Zip Code 34103-3257	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer ENTREPRENEUR	Occupation SMALL BUSINESS OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
SUBTOTAL of Receipts This Page (optional).....		600.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 67 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. EDWARD JONSON			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 16 HAWKVIEW RD			Transaction ID : SA11AI.27242	
City HUDSON	State NH	Zip Code 03051-4408		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 200.00	
Name of Employer RETIRED		Occupation RETIRED	EARMARKED THROUGH CLUB FOR GROWTH	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 550.00		
Full Name (Last, First, Middle Initial) B. KEVIN JUST			Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
Mailing Address 1500 E. HAMILTON AVE, STE 200			Transaction ID : SA11AI.30855	
City CAMPBELL	State CA	Zip Code 95008		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00	
Name of Employer /		Occupation /	ACCOUNTANT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
Full Name (Last, First, Middle Initial) C. CARY KATZ			Date of Receipt MM / DD / YYYY 04 / 18 / 2014	
Mailing Address 9021 GROVE CREST LN			Transaction ID : SA11AI.25471	
City LAS VEGAS	State NV	Zip Code 89134-0522		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2600.00	
Name of Employer COLLEGE LOAN CORPORATION		Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		
SUBTOTAL of Receipts This Page (optional).....			3050.00	
TOTAL This Period (last page this line number only).....				

14020400398

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
STEVEN KATZ

A. Mailing Address **10774 WILKINS AVE**

City State Zip Code
LOS ANGELES CA 90024

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONTENT MEDIA CORPORATION

Occupation
VP BUSINESS & LEGAL AFFAIRS

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

401.00

Date of Receipt

04 / 11 / 2014

Transaction ID : **SA11AI.25113**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)
WAYNE M KEEGAN

B. Mailing Address **448 AUTUMN LAKE TRL**

City State Zip Code
FRANKLIN TN 37067

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE INGRAM CONTENT GROUP

Occupation
CHIEF HUMAN RESOURCES OFFICER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27275**

Amount of Each Receipt this Period

500.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
MR. DENIS KERASOTES

C. Mailing Address **31 FAIRVIEW LANE**

City State Zip Code
SPRINGFIELD IL 62711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1050.00

Date of Receipt

04 / 02 / 2014

Transaction ID : **SA11AI.27539**

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 69 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) JOHN KERIAN		Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 1516 MANVEL AVE		Transaction ID : SA11AI.26222	
City GRAFTON	State ND	Zip Code 58237-2004	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer KERIAN MACHINES		Occupation BUSINESS MANAGER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
Full Name (Last, First, Middle Initial) DAVID KEYSTON		Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
Mailing Address P.O. BOX 7066		Transaction ID : SA11AI.26060	
City CARMEL BY THE	State CA	Zip Code 93921-7066	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1200.00	
Full Name (Last, First, Middle Initial) MR DAVID H KEYSTON TTEE		Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
Mailing Address PO BOX 7066		Transaction ID : SA11AI.29260	
City CARMEL BY THE	State CA	Zip Code 93921	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00	
SUBTOTAL of Receipts This Page (optional).....		1050.00	
TOTAL This Period (last page this line number only).....			

14020400400

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 70 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) DAVID KEYSTON			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
A. Mailing Address P.O. BOX 7066			Transaction ID : SA11AI.27127	
City CARMEL BY THE	State CA	Zip Code 93921-7066	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		EARMARKED THROUGH CLUB FOR GROWTH		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2200.00		

Full Name (Last, First, Middle Initial) UNKNOWN KEYSTON			Date of Receipt MM / DD / YYYY 04 / 14 / 2014	
B. Mailing Address PO BOX 7066			Transaction ID : SA11AI.25206	
City CARMEL	State CA	Zip Code 93921	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		EARMARKED THROUGH CLUB FOR GROWTH		
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) JAMES KING			Date of Receipt MM / DD / YYYY 04 / 17 / 2014	
C. Mailing Address P.O. BOX 47			Transaction ID : SA11AI.25390	
City FARMINGTON	State CT	Zip Code 06034-0047	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		EARMARKED THROUGH CLUB FOR GROWTH		
Name of Employer SELF-EMPLOYED		Occupation SYSTEMS		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....			1550.00	
TOTAL This Period (last page this line number only).....				

14020400401

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 71 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) JAMES KING		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address P.O. BOX 47		Transaction ID : SA11AI.27152	
City FARMINGTON	State CT	Zip Code 06034-0047	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer SELF-EMPLOYED	Occupation SYSTEMS	EARMARKED THROUGH CLUB FOR GROWTH	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) MICHAEL A KING		Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
Mailing Address PO BOX 114		Transaction ID : SA11AI.26064	
City EASTABUCHIE	State MS	Zip Code 39436	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) BERNARD KOETHEFR		Date of Receipt MM / DD / YYYY 05 / 13 / 2014	
Mailing Address 757 SE 17TH ST		Transaction ID : SA11AI.26916	
City FORT LAUDERDALE	State FL	Zip Code 33316-2960	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED	Occupation RETIRED	EARMARKED THROUGH SENATE CONSERVATIVES FUND	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

14020400402

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 72 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
BERNARD KOETHER

Mailing Address **757 SE 17TH ST**

City FORT LAUDERDALE	State FL	Zip Code 33316-2960
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
268.00

Date of Receipt
04 / **08** / **2014**

Transaction ID : **SA11AI.24863**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
PEGGY KORN

Mailing Address **2911 HIGHWAY 19 W**

City BROWNSVILLE	State TN	Zip Code 38012-7407
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation FARMER
--	-----------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
04 / **08** / **2014**

Transaction ID : **SA11AI.24860**

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
RICHARD KORPAN

Mailing Address **31483 MORNING STAR DR.**

City EVERGREEN	State CO	Zip Code 80439-7969
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
05 / **14** / **2014**

Transaction ID : **SA11AI.27008**

Amount of Each Receipt this Period
500.00
EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

14020400403

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 73 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
RICHARD T KOTECKI

Mailing Address **6127 BENNINGTON ST**

City **ENGLEWOOD** State **FL** Zip Code **34224**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
04 / 14 / 2014

Transaction ID : **SA11AI.25212**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
CARY KRESGE

Mailing Address **2045 SUMMERLAND AVENUE**

City **WINTER PARK** State **FL** Zip Code **32789-1453**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FLORIDA MEDICAL DEVELOPMENT** Occupation **BUSINESSMAN**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
04 / 24 / 2014

Transaction ID : **SA11AI.26241**

Amount of Each Receipt this Period
100.00
EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
KARL KRONBERG

Mailing Address **838 ARNOLD RD**

City **LOWELL** State **OH** Zip Code **45744-7195**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **486.00**

Date of Receipt
04 / 29 / 2014

Transaction ID : **SA11AI.26510**

Amount of Each Receipt this Period
62.00
EARMARKED THROUGH SENATE CONSERVATIVES FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

662.00

14020400404

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15
 PAGE 74 OF 238

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) ANNE KUHN		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 22474 NORTH NOTTINGHAM DRIVE		Transaction ID : SA11AI.27233	
City BEVERLY HILLS	State MI	Zip Code 48025-3519	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00 EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

Full Name (Last, First, Middle Initial) AIVARS KUPLIS		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2070 N. CHARTER POINT DR.		Transaction ID : SA11AI.26995	
City ARLINGTON HTS	State IL	Zip Code 60004-7221	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00 EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) ALDO LAGHI		Date of Receipt MM / DD / YYYY 04 / 03 / 2014	
Mailing Address 2895 42ND AVE NORTH		Transaction ID : SA11AI.24339	
City ST PETERSBURG	State FL	Zip Code 33714	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer ALPS SOUTH LLC	Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

14020400405

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) ALDO LAGHI Mailing Address 2895 42ND AVE NORTH City ST PETERSBURG State FL Zip Code 33714 FEC ID number of contributing federal political committee. C Name of Employer ALPS SOUTH LLC Occupation CEO Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00		Date of Receipt <div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>04</div> <div>29</div> <div>2014</div> </div> Transaction ID : SA11AI.26542 Amount of Each Receipt this Period <div> <div>500.00</div> </div>
B. Full Name (Last, First, Middle Initial) JAMES LANGE Mailing Address 7278 E COZY CAMP DR. City PRESCOTT VALLEY State AZ Zip Code 86314-1955 FEC ID number of contributing federal political committee. C Name of Employer RETIRED Occupation RETIRED Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 425.00		Date of Receipt <div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>04</div> <div>08</div> <div>2014</div> </div> Transaction ID : SA11AI.24889 Amount of Each Receipt this Period <div> <div>150.00</div> </div>
C. Full Name (Last, First, Middle Initial) JERRY LAWSON Mailing Address 432 EILEEN DR. City PLEASANTON State TX Zip Code 78064 FEC ID number of contributing federal political committee. C Name of Employer W W WOOD, INC. Occupation PRESIDENT Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00		Date of Receipt <div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>04</div> <div>15</div> <div>2014</div> </div> Transaction ID : SA11AI.25311 Amount of Each Receipt this Period <div> <div>250.00</div> </div>
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)		<div> <div>900.00</div> </div>

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 76 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) MS. ANN LEMERT		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 602 EAGLE ROAD		Transaction ID : SA11AI.27095	
City CEDAR VALE	State KS	Zip Code 67024-9017	Amount of Each Receipt this Period 100.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) DAN M LEONARD		Date of Receipt MM / DD / YYYY 05 / 01 / 2014	
Mailing Address PO BOX 3422		Transaction ID : SA11AI.26608	
City MIDLAND	State TX	Zip Code 79702	Amount of Each Receipt this Period 250.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) HERBERT ALAN LEVIN		Date of Receipt MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 724 E GRINNELL DR		Transaction ID : SA11AI.28397	
City BURBANK	State CA	Zip Code 91501	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer DEPARTMENT OF JUSTICE OF THE STATE OF CALIFORNIA	Occupation LAWYER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....		400.00
TOTAL This Period (last page this line number only).....		

14020400407

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 77 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

<p>Full Name (Last, First, Middle Initial) HERBERT ALAN LEVIN</p> <p>A. Mailing Address 724 E GRINNELL DR</p>		<p>Date of Receipt MM / DD / YYYY 04 / 24 / 2014</p> <p>Transaction ID : SA11AI.29335</p>	
<p>City BURBANK</p> <p>State CA</p> <p>Zip Code 91501</p>	<p>FEC ID number of contributing federal political committee. C</p>	<p>Amount of Each Receipt this Period 35.00</p>	
<p>Name of Employer DEPARTMENT OF JUSTICE OF THE STATE C</p> <p>Occupation LAWYER</p>	<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Election Cycle-to-Date 285.00</p>	
<p>Full Name (Last, First, Middle Initial) MR C H LEWIS II</p> <p>B. Mailing Address PO BOX 70</p>		<p>Date of Receipt MM / DD / YYYY 05 / 06 / 2014</p> <p>Transaction ID : SA11AI.29901</p>	
<p>City GLOSTER</p> <p>State MS</p> <p>Zip Code 39638</p>	<p>FEC ID number of contributing federal political committee. C</p>	<p>Amount of Each Receipt this Period 500.00</p>	
<p>Name of Employer INFORMATION REQUESTED</p> <p>Occupation INFORMATION REQUESTED</p>	<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Election Cycle-to-Date 500.00</p>	
<p>Full Name (Last, First, Middle Initial) CHARLES LIGHT</p> <p>C. Mailing Address 218 NE 5TH ST</p>		<p>Date of Receipt MM / DD / YYYY 04 / 24 / 2014</p> <p>Transaction ID : SA11AI.26362</p>	
<p>City GRANGEVILLE</p> <p>State ID</p> <p>Zip Code 83530</p>	<p>FEC ID number of contributing federal political committee. C</p>	<p>Amount of Each Receipt this Period 900.00</p>	
<p>Name of Employer RETIRED</p> <p>Occupation RETIRED</p>	<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Election Cycle-to-Date 900.00</p>	
<p>SUBTOTAL of Receipts This Page (optional).....</p>		<p>1435.00</p>	
<p>TOTAL This Period (last page this line number only).....</p>		<p>1435.00</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
DOUGLAS LIMBERG
A. Mailing Address **2312 BIRCHWOOD AVE**

City State Zip Code
WILMETTE IL 60091-2348

FEC ID number of contributing
federal political committee.

C

Name of Employer
METRAFLEX CO

Occupation
CONTROLLER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

04 / 01 / 2014

Transaction ID : **SA11AI.24212**

Amount of Each Receipt this Period

200.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)
MR HAROLD G LIPPERT
B. Mailing Address **PO BOX 965**

City State Zip Code
FORT BENTON MT 59442

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 29 / 2014

Transaction ID : **SA11AI.29538**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
JOEL LOVELESS
C. Mailing Address **P O BOX 2444**

City State Zip Code
HARLINGEN TX 78551

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 23 / 2014

Transaction ID : **SA11AI.31120**

Amount of Each Receipt this Period

250.00

ADMINISTRATOR

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) BREWSTER MACFARLAND			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 415 NORTH STATE STREET, SUITE 1			Transaction ID : SA11AI.26999	
City CHICAGO	State IL	Zip Code 60654-4607	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer LAW BULLETIN PUBLISHING COMPANY		Occupation EXECUTIVE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1200.00		

Full Name (Last, First, Middle Initial) LANNING MACFARLAND			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 415 N STATE ST STE 1			Transaction ID : SA11AI.27258	
City CHICAGO	State IL	Zip Code 60654-4607	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) MR WILLIAM D MAJURE			Date of Receipt MM / DD / YYYY 04 / 08 / 2014	
Mailing Address 121 BOOTH CIR			Transaction ID : SA11AI.27951	
City OCEAN SPRINGS	State MS	Zip Code 39564	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

950.00

14020400410

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

<p>A. Full Name (Last, First, Middle Initial) KEN MANN</p> <p>Mailing Address 3747 BERRY DR</p> <p>City STUDIO CITY State CA Zip Code 91604-3855</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer FIRST MERCURY Occupation INSURANCE</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 425.00</p>			<p>Date of Receipt 04 / 18 / 2014</p> <p>Transaction ID : SA11AI.25470</p> <p>Amount of Each Receipt this Period 125.00</p>	
<p>B. Full Name (Last, First, Middle Initial) RICHARD MARTIN</p> <p>Mailing Address 688 MAHARD DR</p> <p>City TWIN FALLS State ID Zip Code 83301</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 500.00</p>			<p>Date of Receipt 04 / 23 / 2014</p> <p>Transaction ID : SA11AI.30903</p> <p>Amount of Each Receipt this Period 500.00</p> <p>RETIRED</p>	
<p>C. Full Name (Last, First, Middle Initial) TERA MARTIN</p> <p>Mailing Address 1025 CR 351</p> <p>City NEW ALBANY State MS Zip Code 38652</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF</p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date 500.00</p>			<p>Date of Receipt 04 / 24 / 2014</p> <p>Transaction ID : SA11AI.26308</p> <p>Amount of Each Receipt this Period 500.00</p>	
<p>SUBTOTAL of Receipts This Page (optional).....</p> <p>TOTAL This Period (last page this line number only).....</p>			<p>1125.00</p>	

14020400411

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 81 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MARY MATTHEWS

Mailing Address **4876 PATRICK RD**

City WINNSBORO	State SC	Zip Code 29180-6491
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MONTGOMERY & YARBROUGH	Occupation CPA
---	--------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
04 / **01** / **2014**

Transaction ID : **SA11AI.24202**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
MARY MATTHEWS

Mailing Address **4876 PATRICK RD**

City WINNSBORO	State SC	Zip Code 29180-6491
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MONTGOMERY & YARBROUGH	Occupation CPA
---	--------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
04 / **08** / **2014**

Transaction ID : **SA11AI.24893**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BILL B MAY

Mailing Address **10631 MAGDALENA RD**

City LOS ALTOS	State CA	Zip Code 94024-0255
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
04 / **24** / **2014**

Transaction ID : **SA11AI.26196**

Amount of Each Receipt this Period
300.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

650.00

14020400412

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 82 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) MARK S MAYFIELD			Date of Receipt MM / DD / YYYY 05 / 01 / 2014	
Mailing Address 109 CHERRY LAUREL LN			Transaction ID : SA11A1.26641	
City	State	Zip Code		
RIDGELAND	MS	39157		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
C			500.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1200.00		
B. Full Name (Last, First, Middle Initial) MR. JOHN ERIC MCCRAY			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 1800 ATRIUM PKWY APT 416			Transaction ID : SA11A1.27088	
City	State	Zip Code		
NAPA	CA	94559		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
C			100.00	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) MR HAROLD M MCDONALD			Date of Receipt MM / DD / YYYY 04 / 15 / 2014	
Mailing Address 1924 MARCONI CIR			Transaction ID : SA11A1.28354	
City	State	Zip Code		
ANNAPOLIS	MD	21401		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period	
C			500.00	
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 600.00		
SUBTOTAL of Receipts This Page (optional).....			1100.00	
TOTAL This Period (last page this line number only).....				

14020400413

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

<p>Full Name (Last, First, Middle Initial) SANDRA MCGOWAN</p>		<p>Date of Receipt MM / DD / YYYY 05 / 14 / 2014</p>	
<p>Mailing Address PO BOX 1042</p>		<p>Transaction ID : SA11AI.27007</p>	
<p>City State Zip Code ST MICHAELS MD 21663-1042</p>	<p>Amount of Each Receipt this Period 500.00 EARMARKED THROUGH CLUB FOR GROWTH</p>		
<p>FEC ID number of contributing federal political committee. C</p>	<p>Occupation RETIRED</p>		
<p>Name of Employer RETIRED</p>	<p>Election Cycle-to-Date 700.00</p>		
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>			
<p>Full Name (Last, First, Middle Initial) LARRY MCGREGOR</p>		<p>Date of Receipt MM / DD / YYYY 05 / 14 / 2014</p>	
<p>Mailing Address 7425 EAST PRINCESS BOULEVARD UNIT</p>		<p>Transaction ID : SA11AI.27103</p>	
<p>City State Zip Code SCOTTSDALE AZ 85255-5124</p>	<p>Amount of Each Receipt this Period 100.00 EARMARKED THROUGH CLUB FOR GROWTH</p>		
<p>FEC ID number of contributing federal political committee. C</p>	<p>Occupation RETIRED</p>		
<p>Name of Employer RETIRED</p>	<p>Election Cycle-to-Date 218.00</p>		
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>			
<p>Full Name (Last, First, Middle Initial) PAUL MCMURRY</p>		<p>Date of Receipt MM / DD / YYYY 04 / 23 / 2014</p>	
<p>Mailing Address PO BOX 447</p>		<p>Transaction ID : SA11AI.26029</p>	
<p>City State Zip Code HATTIESBURG MS 39403</p>	<p>Amount of Each Receipt this Period 1000.00</p>		
<p>FEC ID number of contributing federal political committee. C</p>	<p>Occupation INFORMATION REQUESTED PER BEST EFF</p>		
<p>Name of Employer INFORMATION REQUESTED PER BEST EFF</p>	<p>Election Cycle-to-Date 1000.00</p>		
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>			
<p>SUBTOTAL of Receipts This Page (optional).....</p>		<p>1600.00</p>	
<p>TOTAL This Period (last page this line number only).....</p>		<p></p>	

14020400414

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 84 OF 238	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) GREG MCNECE			Date of Receipt MM / DD / YYYY 04 / 17 / 2014	
Mailing Address P.O. BOX 1830			Transaction ID : SA11AI.25389	
City DAVIS	State CA	Zip Code 95617-1830		
FEC ID number of contributing federal political committee. C				
Name of Employer DAVISVILLE PROPERTIES, INC.		Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2350.00		
			Amount of Each Receipt this Period 250.00 EARMARKED THROUGH CLUB FOR GROWTH	
B. Full Name (Last, First, Middle Initial) GREG MCNECE			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address P.O. BOX 1830			Transaction ID : SA11AI.26191	
City DAVIS	State CA	Zip Code 95617-1830		
FEC ID number of contributing federal political committee. C				
Name of Employer DAVISVILLE PROPERTIES, INC.		Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2450.00		
			Amount of Each Receipt this Period 100.00 EARMARKED THROUGH CLUB FOR GROWTH	
C. Full Name (Last, First, Middle Initial) GREG MCNECE			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address P.O. BOX 1830			Transaction ID : SA11AI.26987	
City DAVIS	State CA	Zip Code 95617-1830		
FEC ID number of contributing federal political committee. C				
Name of Employer DAVISVILLE PROPERTIES, INC.		Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2550.00		
			Amount of Each Receipt this Period 100.00 EARMARKED THROUGH CLUB FOR GROWTH	
SUBTOTAL of Receipts This Page (optional).....			450.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 238

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. GREG MCNECE			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address P.O. BOX 1830			Transaction ID : SA11AI.27328	
City DAVIS	State CA	Zip Code 95617-1830	Amount of Each Receipt this Period 250.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer DAVISVILLE PROPERTIES, INC.		Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2800.00		
Full Name (Last, First, Middle Initial) B. GREGORY MCNECE			Date of Receipt MM / DD / YYYY 05 / 01 / 2014	
Mailing Address PO BOX 1830			Transaction ID : SA11AI.26589	
City DAVIS	State CA	Zip Code 95617-1830	Amount of Each Receipt this Period 100.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer DAVISVILLE MANAGEMENT CO.		Occupation PROPERTY MANAGEMENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 350.00		
Full Name (Last, First, Middle Initial) C. GREGORY MCNECE			Date of Receipt MM / DD / YYYY 05 / 01 / 2014	
Mailing Address PO BOX 1830			Transaction ID : SA11AI.26591	
City DAVIS	State CA	Zip Code 95617-1830	Amount of Each Receipt this Period 100.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer DAVISVILLE MANAGEMENT CO.		Occupation PROPERTY MANAGEMENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 450.00		
SUBTOTAL of Receipts This Page (optional)			450.00	
TOTAL This Period (last page this line number only)				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) DON MCQUEEN		Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 131 BILL MCQUEEN RD		Transaction ID : SA11AI.26334	
City SEMINARY	State MS	Zip Code 39479	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer BUSINESS OWNER	Occupation DON'S FARM STAND		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
B. Full Name (Last, First, Middle Initial) KAY MCQUEEN		Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 131 BILL MCQUEEN RD		Transaction ID : SA11AI.26336	
City SEMINARY	State MS	Zip Code 39479	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2400.00		
C. Full Name (Last, First, Middle Initial) JUDITH MERSHON		Date of Receipt MM / DD / YYYY 04 / 08 / 2014	
Mailing Address 1676 FAIRBURN AVE		Transaction ID : SA11AI.24897	
City LOS ANGELES	State CA	Zip Code 90024-6060	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....		5250.00	
TOTAL This Period (last page this line number only).....			

14020400417

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JUDITH MERSHON

Mailing Address **1676 FAIRBURN AVE**

City **LOS ANGELES** State **CA** Zip Code **90024-6060**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
04 / 21 / 2014

Transaction ID : **SA11AI.25815**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
JUDITH MERSHON

Mailing Address **1676 FAIRBURN AVE**

City **LOS ANGELES** State **CA** Zip Code **90024-6060**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
05 / 13 / 2014

Transaction ID : **SA11AI.26919**

Amount of Each Receipt this Period
500.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

C. Full Name (Last, First, Middle Initial)
ARTHUR MILOT

Mailing Address **PO BOX 456**

City **JAMESTOWN** State **RI** Zip Code **02835-0456**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
05 / 14 / 2014

Transaction ID : **SA11AI.27129**

Amount of Each Receipt this Period
2600.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3350.00

14020400418

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 88 OF 238	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) ARTHUR MILOT		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address PO BOX 456		Transaction ID : SA11AI.27130	
City JAMESTOWN	State RI	Zip Code 02835-0456	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C		Amount of Each Receipt this Period 2600.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		
B. Full Name (Last, First, Middle Initial) JERRY MITCHELL		Date of Receipt MM / DD / YYYY 04 / 01 / 2014	
Mailing Address PO BOX 380		Transaction ID : SA11AI.24210	
City BRIGHTON	State CO	Zip Code 80601-0380	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C		Amount of Each Receipt this Period 104.00	
Name of Employer SUNCOR INC	Occupation REFINERY OPS		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 208.00		
C. Full Name (Last, First, Middle Initial) MARCIA MIXON		Date of Receipt MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 5417 SUFFOLK DRIVE		Transaction ID : SA11AI.24242	
City JACKSON	State MI	Zip Code 39211	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C		Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....		2804.00	
TOTAL This Period (last page this line number only).....			

14020400419

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 89 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. LUIS R MOLA			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 2509 CASTILLA ISLE			Transaction ID : SA11AI.26248	
City FORT LAUDERDALE	State FL	Zip Code 33301-1580	Amount of Each Receipt this Period 500.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
Full Name (Last, First, Middle Initial) B. JOE MORGAN			Date of Receipt MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 3106 CRESTWOOD DRIVE			Transaction ID : SA11AI.27395	
City LAUREL	State MS	Zip Code 39440-1961	Amount of Each Receipt this Period 50.00 PRESIDENT	
FEC ID number of contributing federal political committee. C				
Name of Employer TEMPICO MANUFACTURING, INC.		Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
Full Name (Last, First, Middle Initial) C. PETER MOYER			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 53 FOX RUN ROAD			Transaction ID : SA11AI.27107	
City NEW CANAAN	State CT	Zip Code 06840-2820	Amount of Each Receipt this Period 200.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 600.00		
SUBTOTAL of Receipts This Page (optional).....			750.00	
TOTAL This Period (last page this line number only).....				

14020400420

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 90. OF 238

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) SCOTT MUEHLBERGER			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 616 MEMORIAL HEIGHTS DRIVE APT. #1			Transaction ID : SA11AI.26194	
City HOUSTON	State TX	Zip Code 77007-6080	Amount of Each Receipt this Period 250.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer BRACEWELL & GIULIANI		Occupation LAWYER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) SUSAN MULLEN			Date of Receipt MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 401 EAST 86 ST APT 16A			Transaction ID : SA11AI.24173	
City NEW YORK	State NY	Zip Code 10028	Amount of Each Receipt this Period 42.00 EARMARKED THROUGH SENATE CONSERVATIVES FUND	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 417.00		

Full Name (Last, First, Middle Initial) SUSAN MULLEN			Date of Receipt MM / DD / YYYY 04 / 10 / 2014	
Mailing Address 401 EAST 86 ST APT 16A			Transaction ID : SA11AI.25055	
City NEW YORK	State NY	Zip Code 10028	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 917.00		

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

792.00

14020400421

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SUSAN MULLEN

Mailing Address **401 EAST 86 ST**
APT 16A

City **NEW YORK** State **NY** Zip Code **10028**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **1417.00**

Date of Receipt

04 / 14 / 2014

Transaction ID : **SA11AI.25224**

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM S. MULLINS

Mailing Address **10 TWIN OAKS PLACE**

City **LAUREL** State **MS** Zip Code **39440**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt

04 / 24 / 2014

Transaction ID : **SA11AI.26306**

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
CATHERINE MURPHY

Mailing Address **P.O. BOX 750006**

City **DAYTON** State **OH** Zip Code **45475-0006**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27346**

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

14020400422

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) DAVID NEARON		Date of Receipt MM / DD / YYYY 05 / 01 / 2014
Mailing Address 111 SOUTHVIEW LANE		Transaction ID : SA11AI.26594
City ALAMO	State CA	Zip Code 94507-2314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY	EARMARKED THROUGH CLUB FOR GROWTH
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) PHYLLIS NICHOLAS		Date of Receipt MM / DD / YYYY 05 / 14 / 2014
Mailing Address 40 HOWARD ROAD		Transaction ID : SA11AI.27168
City GREENWICH	State CT	Zip Code 06831-3104
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	EARMARKED THROUGH CLUB FOR GROWTH
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1150.00	

Full Name (Last, First, Middle Initial) ROBBIE NICHOLS		Date of Receipt MM / DD / YYYY 04 / 08 / 2014
Mailing Address 105 WALTHALL ST		Transaction ID : SA11AI.24862
City GREENWOOD	State MS	Zip Code 38930-4426
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF-EMPLOYED	Occupation INSURANCE SALES	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

14020400423

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:	PAGE 93 OF 238
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ROY SCOTT NUNLEY

Mailing Address P.O. BOX 389

City DENNIS	State MS	Zip Code 38838
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
04 / 24 / 2014

Transaction ID : SA11AI.26297

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
MS VIRGINIA O'BEIRNE

Mailing Address 215 ARLINGTON AVE

City NATCHEZ	State MS	Zip Code 39120
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
--------------------------------------	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
04 / 29 / 2014

Transaction ID : SA11AI.29497

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
MARYANN OBERHOFER

Mailing Address 3708 POINT CLEAR DR.

City OCEAN SPRINGS	State MS	Zip Code 39574
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
04 / 11 / 2014

Transaction ID : SA11AI.25114

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 94 OF 238

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

JOSEPH OSKOWIAK

A.

Mailing Address 1611 EDGE HILL RD

City
ABINGTON

State Zip Code
PA 19001-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

04 / 01 / 2014

Transaction ID : SA11AI.24189

Amount of Each Receipt this Period

50.00

EARMARKED THROUGH SENATE CONSERVATIVES
FUND

Full Name (Last, First, Middle Initial)

JOSEPH OSKOWIAK

B.

Mailing Address 1611 EDGE HILL RD

City
ABINGTON

State Zip Code
PA 19001-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.25023

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

NELSON L PAYNE

C.

Mailing Address 37119 SABER CT

City
GREENBACKVILLE

State Zip Code
VA 23356

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

04 / 23 / 2014

Transaction ID : SA11AI.29211

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

175.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 95 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) NELSON L PAYNE			Date of Receipt MM / DD / YYYY 05 / 07 / 2014	
Mailing Address 37119 SABER CT			Transaction ID : SA11AI.29971	
City GREENBACKVILLE	State VA	Zip Code 23356	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 550.00		

Full Name (Last, First, Middle Initial) BARBARA PEACOCK			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 7286 SNOWBERRY LN			Transaction ID : SA11AI.26360	
City CANAL WINCHESTER	State OH	Zip Code 43110-9110	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 275.00		

Full Name (Last, First, Middle Initial) NICHOLAS PEAY			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2965 FAIRMOUNT BLVD.			Transaction ID : SA11AI.27123	
City CLEVELAND HEIGHTS	State OH	Zip Code 44118-4060	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

14020400426

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15
 PAGE 96 OF 238

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
AUSTIN PERKINS
 A. Mailing Address **138 E. FRONT ST., APT 1**

City **HATTIESBURG** State **MI** Zip Code **39401**

FEC ID number of contributing federal political committee.

C

Name of Employer
TELLUS

Occupation
ENGINEER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 22 / 2014

Transaction ID : **SA11AI.25969**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)
THOMAS P PETTIS
 B. Mailing Address **812 STATIONS ST**

City **WAYNESBORO** State **MS** Zip Code **39367**

FEC ID number of contributing federal political committee.

C

Name of Employer
PETTIS INVESTMENTS

Occupation
FINANCIAL ADVISOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

390.00

Date of Receipt

04 / 25 / 2014

Transaction ID : **SA11AI.23610**

Amount of Each Receipt this Period

240.00

PETTIS INVESTMENTS

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
PETTIS INVESTMENTS
 C. Mailing Address **812 STATION ST**

City **WAYNESBORO** State **MS** Zip Code **39367**

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

240.00

Date of Receipt

04 / 25 / 2014

Transaction ID : **SA11AI.26367**

Amount of Each Receipt this Period

240.00

SEE ATTRIBUTION MEMO

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

490.00

14020400427

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 97 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) GEORGE PFAFF		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
A. Mailing Address 16 BEAVER CREEK LANE		Transaction ID : SA11AI.27157	
City ASHEVILLE	State NC	Zip Code 28804-2765	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer RETIRED	Occupation RETIRED	EARMARKED THROUGH CLUB FOR GROWTH	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
Full Name (Last, First, Middle Initial) JOHN R PFEIFFER		Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
B. Mailing Address 210 W KNOX DR		Transaction ID : SA11AI.30095	
City TUCSON	State AZ	Zip Code 85705	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
Full Name (Last, First, Middle Initial) E CHERYL PIERCE		Date of Receipt MM / DD / YYYY 04 / 14 / 2014	
C. Mailing Address 2138 MONROE RD		Transaction ID : SA11AI.25256	
City MOSELLE	State MS	Zip Code 39459	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional)		2750.00	
TOTAL This Period (last page this line number only)			

14020400428

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 98 OF 238	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial) MITCHEL PLATT			Date of Receipt 04 / 01 / 2014	
Mailing Address 120 W SPARROW DR			Transaction ID : SA11AI.24215	
City CHANDLER	State AZ	Zip Code 85286-8513	Amount of Each Receipt this Period 1200.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH SENATE CONSERVATIVES FUND	
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date 5200.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
B. Full Name (Last, First, Middle Initial) MITCHEL PLATT			Date of Receipt 04 / 01 / 2014	
Mailing Address 120 W SPARROW DR			Transaction ID : SA11AI.30585	
City CHANDLER	State AZ	Zip Code 85286-8513	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH SENATE CONSERVATIVES FUND	
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date 7800.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff				
C. Full Name (Last, First, Middle Initial) MITCHEL PLATT			Date of Receipt 04 / 01 / 2014	
Mailing Address 120 W SPARROW DR			Transaction ID : SA11AI.30586	
City CHANDLER	State AZ	Zip Code 85286-8513	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			WILL BE REFUNDED: EARMARKED THROUGH SENATE CONSERVATIVES FUND	
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date 8000.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
SUBTOTAL of Receipts This Page (optional)			4000.00	
TOTAL This Period (last page this line number only)				

14020400429

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 99 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) WILLIAM PURNELL			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
A. Mailing Address 9776 S JOHNSON COURT			Transaction ID : SA11AI.26997	
City LITTLETON	State CO	Zip Code 80127-8593	Amount of Each Receipt this Period 200.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer NA		Occupation NA		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400.00		
Full Name (Last, First, Middle Initial) WILLIAM PURNELL			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
B. Mailing Address 9776 S JOHNSON COURT			Transaction ID : SA11AI.27327	
City LITTLETON	State CO	Zip Code 80127-8593	Amount of Each Receipt this Period 200.00 EARMARKED THROUGH CLUB FOR GROWTH	
FEC ID number of contributing federal political committee. C				
Name of Employer NA		Occupation NA		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 600.00		
Full Name (Last, First, Middle Initial) LENORA PUSTA			Date of Receipt MM / DD / YYYY 04 / 08 / 2014	
C. Mailing Address 138 W SUNFLOWER DRIVE			Transaction ID : SA11AI.24533	
City PAYSON	State AZ	Zip Code 85541	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2225.00		
SUBTOTAL of Receipts This Page (optional).....			500.00	
TOTAL This Period (last page this line number only).....				

14020400430

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

LENORA PUSTA

A.

Mailing Address **138 W SUNFLOWER DRIVE**

City

PAYSON

State

AZ

Zip Code

85541

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2325.00

Date of Receipt

05 / 06 / 2014

Transaction ID : **SA11AI.26716**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

LENORA PUSTA

B.

Mailing Address **138 W SUNFLOWER DRIVE**

City

PAYSON

State

AZ

Zip Code

85541

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2550.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27005**

Amount of Each Receipt this Period

225.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)

LENORA PUSTA

C.

Mailing Address **138 W SUNFLOWER DRIVE**

City

PAYSON

State

AZ

Zip Code

85541

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3275.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27010**

Amount of Each Receipt this Period

725.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
LENORA PUSTA

Mailing Address **138 W SUNFLOWER DRIVE**

City **PAYSON** State **AZ** Zip Code **85541**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **3325.00**

Date of Receipt
05 / 14 / 2014

Transaction ID : **SA11AI.30587**

Amount of Each Receipt this Period
50.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
JEANETTE S QUILHOT

Mailing Address **9464 S. 700 EAST-92**

City **ROANOKE** State **IN** Zip Code **46783**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
05 / 14 / 2014

Transaction ID : **SA11AI.27298**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
EDWARD RAHILL

Mailing Address **1965 HILKORY VALLEY ROAD**

City **MILFORD** State **MI** Zip Code **48380**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt
04 / 15 / 2014

Transaction ID : **SA11AI.25309**

Amount of Each Receipt this Period
245.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1295.00

14020400432

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
DANNIE REED
Mailing Address **401 COLLEGE STREET**

City State Zip Code
ACKERMAN MS 39735

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
AGRICULTURE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 02 / 2014

Transaction ID : **SA11AI.24246**

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
JAMES REMINGTON
Mailing Address **2300 CEDARFIELD PARKWAY**
APT. 263

City State Zip Code
RICHMOND VA 23233-1942

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

04 / 23 / 2014

Transaction ID : **SA11AI.26072**

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
JAMES REMINGTON
Mailing Address **2300 CEDARFIELD PARKWAY**
APT. 263

City State Zip Code
RICHMOND VA 23233-1942

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

05 / 05 / 2014

Transaction ID : **SA11AI.26688**

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) JAMES REMINGTON		Date of Receipt MM / DD / YYYY 05 / 05 / 2014
Mailing Address 2300 CEDARFIELD PARKWAY APT. 263		Transaction ID : SA11AI.30588
City RICHMOND	State VA	Zip Code 23233-1942
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 900.00
Name of Employer RETIRED	Occupation RETIRED	EARMARKED THROUGH SENATE CONSERVATIVES FUND
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00	

Full Name (Last, First, Middle Initial) ALFRED REUTHER		Date of Receipt MM / DD / YYYY 04 / 16 / 2014
Mailing Address 81 LEWISTON RD		Transaction ID : SA11AI.25335
City GROSSE POINTE FARMS	State MI	Zip Code 48236-3612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation RETIRED	EARMARKED THROUGH CLUB FOR GROWTH
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) RODNEY REYNOLDS		Date of Receipt MM / DD / YYYY 04 / 14 / 2014
Mailing Address 3735 SANDY OAKS LN		Transaction ID : SA11AI.25194
City MISSOURI CITY	State TX	Zip Code 77459-6724
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer PILLSBURY WINTHROP SHAW PITTMAN	Occupation ATTORNEY	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

14020400434

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 104 OF 238	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) KENT RHUDY		Date of Receipt MM / DD / YYYY 04 / 01 / 2014	
Mailing Address 4210 FOX TRL		Transaction ID : SA11AI.24209	
City TEMPLE	State TX	Zip Code 76504-3415	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 104.00	
Name of Employer BLACKLAND IMPLEMENT CO	Occupation MANAGER	EARMARKED THROUGH SENATE CONSERVATIVES FUND	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 297.00		

Full Name (Last, First, Middle Initial) BRIAN RICHARDSON		Date of Receipt MM / DD / YYYY 04 / 18 / 2014	
Mailing Address 1718 PORT BARMOUTH PL		Transaction ID : SA11AI.25469	
City NEWPORT BEACH	State CA	Zip Code 92660-5313	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer FSWW, INC.	Occupation CONSULTANT	Election Cycle-to-Date 392.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) SAMUEL RICHARDSON		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 114 KIMBERLY CT		Transaction ID : SA11AI.26990	
City COLUMBIA	State TN	Zip Code 38401-6906	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	Election Cycle-to-Date 550.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

304.00

14020400435

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 105 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SARAH RINDLAUB

Mailing Address **8441 SE 68TH ST PMB 217**

City MERCER ISLAND	State WA	Zip Code 98040-5235
------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
--------------------------------------	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
04 / 23 / 2014

Transaction ID : **SA11AI.25984**

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
LESLIE ROSE

Mailing Address **330 SOUTH OCEAN BOULEVARD**

City PALM BEACH	State FL	Zip Code 33480-4214
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
05 / 01 / 2014

Transaction ID : **SA11AI.26609**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
LESLIE ROSE

Mailing Address **330 SOUTH OCEAN BOULEVARD**

City PALM BEACH	State FL	Zip Code 33480-4214
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
05 / 01 / 2014

Transaction ID : **SA11AI.30589**

Amount of Each Receipt this Period
900.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

14020400436

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 106 OF 238

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR. ANTHONY H. RYAN
Mailing Address **83 DORCHESTER RD**

City State Zip Code
LYME NH 03768

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27126**

Amount of Each Receipt this Period

500.00

EARMARKED THROUGH CLUB FOR GROWTH

B. Full Name (Last, First, Middle Initial)
MR. DALE W. SALSGIVER
Mailing Address **PO BOX 205**

City State Zip Code
DAYTON PA 16222-0205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt

04 / 16 / 2014

Transaction ID : **SA11AI.28641**

Amount of Each Receipt this Period

35.00

C. Full Name (Last, First, Middle Initial)
MR. DALE W. SALSGIVER
Mailing Address **PO BOX 205**

City State Zip Code
DAYTON PA 16222-0205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
330.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.26966**

Amount of Each Receipt this Period

50.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

585.00

14020400437

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
JOHN SAMPSON

Mailing Address **9614 PARKWOOD CT**

City **FORT MYERS** State **FL** Zip Code **33908-2861**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
04 / 01 / 2014

Transaction ID : **SA11AI.23642**

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. ROGER SAYLER

Mailing Address **59 WHITE FALL LANE**

City **NEW CANAAN** State **CT** Zip Code **06840-2038**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
05 / 14 / 2014

Transaction ID : **SA11AI.27009**

Amount of Each Receipt this Period
600.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
WILLIAM SCHEIFLEY

Mailing Address **714 WINSTON LN**

City **SUGAR LAND** State **TX** Zip Code **77479-5835**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **216.00**

Date of Receipt
05 / 13 / 2014

Transaction ID : **SA11AI.26847**

Amount of Each Receipt this Period
25.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

725.00

14020400438

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 108 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) PAUL SCHIERL		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 111 NORTH WASHINGTON STREET, SUITE		Transaction ID : SA11AI.27245	
City GREEN BAY	State WI	Zip Code 54301-4257	Amount of Each Receipt this Period 1300.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) PAUL SCHIERL		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 111 NORTH WASHINGTON STREET, SUITE		Transaction ID : SA11AI.27246	
City GREEN BAY	State WI	Zip Code 54301-4257	Amount of Each Receipt this Period 2600.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) MICHEAL C SCHNEIDER		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 2024 SILVER HILL RD		Transaction ID : SA11AI.27271	
City STONE MOUNTAIN	State GA	Zip Code 30087-1729	Amount of Each Receipt this Period 200.00 EARMARKED THROUGH CLUB FOR GROWTH
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

SUBTOTAL of Receipts This Page (optional)	4100.00
TOTAL This Period (last page this line number only)	

14020400439

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 109 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. GIL SCHONOUR			Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
Mailing Address PO BOX 835			Transaction ID : SA11AI.26177	
City FORT WASHINGTON	State PA	Zip Code 19034	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00	
Name of Employer SELF-EMPLOYED		Occupation ENGINEER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
Full Name (Last, First, Middle Initial) B. JEAN SCHUM			Date of Receipt MM / DD / YYYY 04 / 02 / 2014	
Mailing Address 7425 FOURWINDS DR			Transaction ID : SA11AI.27503	
City CINCINNATI	State OH	Zip Code 45242-5912	Amount of Each Receipt this Period 195.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 195.00	
Name of Employer		Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 290.00		
Full Name (Last, First, Middle Initial) C. DANIEL SCHWINN			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address P.O. BOX 511028			Transaction ID : SA11AI.27001	
City MELBOURNE BEACH	State FL	Zip Code 32951-1028	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 2000.00	
Name of Employer AVIDYNE		Occupation MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		
SUBTOTAL of Receipts This Page (optional).....			2445.00	
TOTAL This Period (last page this line number only).....				

14020400440

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 110 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt

04 / 01 / 2014

Transaction ID : **SA11AI.31164**

Amount of Each Receipt this Period

15243.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt

04 / 29 / 2014

Transaction ID : **SA11AI.31189**

Amount of Each Receipt this Period

3410.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City State Zip Code
ALEXANDRIA VA 22313

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt

05 / 01 / 2014

Transaction ID : **SA11AI.31168**

Amount of Each Receipt this Period

1440.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020400441

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 111 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
05 / 05 / 2014

Transaction ID : **SA11AI.31167**

Amount of Each Receipt this Period
1434.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
05 / 13 / 2014

Transaction ID : **SA11AI.31166**

Amount of Each Receipt this Period
6206.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SENATE CONSERVATIVES FUND

Mailing Address **PO BOX 388**

City **ALEXANDRIA** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C C00448696**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
126033.00

Date of Receipt
05 / 14 / 2014

Transaction ID : **SA11AI.31165**

Amount of Each Receipt this Period
1570.00

TOTAL EARMARKED THROUGH THIS CONDUIT.
PAC LIMIT NOT AFFECTED
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

14020400442

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

WILLIAM SHANAHAN

A.

Mailing Address 20342 TANAGER PL

City

LEESBURG

State

VA

Zip Code

20175-8892

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEPT. OF COMMERCE

Occupation
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

208.00

Date of Receipt

MM / DD / YYYY
04 / 01 / 2014

Transaction ID : SA11AI.24211

Amount of Each Receipt this Period

104.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

WILLIAM SHEPARD

B.

Mailing Address 141 W JACKSON BLVD

City

CHICAGO

State

IL

Zip Code

60604-2992

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

MM / DD / YYYY
04 / 01 / 2014

Transaction ID : SA11AI.24214

Amount of Each Receipt this Period

250.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

Full Name (Last, First, Middle Initial)

MICHAEL E SHOTWELL

C.

Mailing Address P. O. BOX 533

City

ELLISVILLE

State

MS

Zip Code

39437

FEC ID number of contributing
federal political committee.

C

Name of Employer
EAST JASPER SCHOOL DIST.

Occupation
SCHOOL TEACHER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

235.00

Date of Receipt

MM / DD / YYYY
04 / 30 / 2014

Transaction ID : SA11AI.26583

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

404.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 113 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
LYNN D SIMMONS

Mailing Address **5869 COUNTY HIGHWAY 27**

City SPRINGVILLE	State AL	Zip Code 35146
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
04 / 02 / 2014

Transaction ID : SA11AI.27638

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
ALLEN SIMON

Mailing Address **1383 N CRISS ST**

City CHANDLER	State AZ	Zip Code 85226-1307
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
2850.00

Date of Receipt
04 / 09 / 2014

Transaction ID : SA11AI.24994

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ALLEN SIMON

Mailing Address **1383 N CRISS ST**

City CHANDLER	State AZ	Zip Code 85226-1307
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
3100.00

Date of Receipt
05 / 14 / 2014

Transaction ID : SA11AI.27006

Amount of Each Receipt this Period
250.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

14020400444

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

MR RALPH G SKILLEN

A.

Mailing Address 12308 CHILDRESS ST

City

BAKERSFIELD

State

CA

Zip Code

93312

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

04 / 30 / 2014

Transaction ID : SA11AI.29735

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

ROBERT L. SLATER

B.

Mailing Address 515 S.W. CALIFORNIA AVENUE

City

STUART

State

FL

Zip Code

34994-2946

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INVESTMENT MANAGER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

04 / 21 / 2014

Transaction ID : SA11AI.25899

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

CYNTHIA SLAUGHTER

C.

Mailing Address 13 ORSINGER HL

City

SAN ANTONIO

State

TX

Zip Code

78230-1500

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

920.00

Date of Receipt

04 / 08 / 2014

Transaction ID : SA11AI.24892

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 115 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ANTHONY L SMITH

Mailing Address **51 LANCAIR DR**

City PICAYUNE	State MS	Zip Code 39466
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
---	---

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
04 / **14** / **2014**

Transaction ID : **SA11AI.25260**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BAKER SMITH

Mailing Address **3360 E. TERRELL BRANCH CT. SE**

City MARIETTA	State GA	Zip Code 30067-5164
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BDD CONSULTING LLC	Occupation MANAGEMENT CONSULTANT
---	--

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
05 / **14** / **2014**

Transaction ID : **SA11AI.27167**

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
J. LAVON SMITH

Mailing Address **4 WILLOW BEND DR. STE 2A**

City HATTIESBURG	State MS	Zip Code 39402
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
04 / **23** / **2014**

Transaction ID : **SA11AI.26015**

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

14020400446

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 116 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) THOMAS W. SMITH			Date of Receipt MM / DD / YYYY 05 / 01 / 2014	
A. Mailing Address 2200 BUTTS RD. SUITE 320			Transaction ID : SA11AI.26595	
City BOCA RATON	State FL	Zip Code 33431	Amount of Each Receipt this Period 1600.00	
FEC ID number of contributing federal political committee. C		EARMARKED THROUGH CLUB FOR GROWTH		
Name of Employer PRESCOTT INVESTORS INC		Occupation INVESTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) THOMAS W. SMITH			Date of Receipt MM / DD / YYYY 05 / 01 / 2014	
B. Mailing Address 2200 BUTTS RD. SUITE 320			Transaction ID : SA11AI.26596	
City BOCA RATON	State FL	Zip Code 33431	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C		EARMARKED THROUGH CLUB FOR GROWTH		
Name of Employer PRESCOTT INVESTORS INC		Occupation INVESTOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) NEAL SNEBOLD			Date of Receipt MM / DD / YYYY 04 / 06 / 2014	
C. Mailing Address 26 MOUNT PLEASANT ST			Transaction ID : SA11AI.24469	
City WINCHESTER	State MA	Zip Code 01890-3043	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		EARMARKED THROUGH CLUB FOR GROWTH		
Name of Employer EYE HEALTH SERVICES		Occupation PHYSICIAN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional).....			4300.00	
TOTAL This Period (last page this line number only).....				

14020400447

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 117 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. SOPER

Mailing Address **75 BEAVER BROOK ROAD**

City	State	Zip Code
LYME	CT	06371-3202

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27315**

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)

B. HARRY SPOONER

Mailing Address **166 CAROLINE POINTE BLVD**

City	State	Zip Code
MADISON	MS	39110

FEC ID number of contributing federal political committee.

C

Name of Employer
SPOONER ENERGY, INC.

Occupation
GEOLOGIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

04 / 22 / 2014

Transaction ID : **SA11AI.25967**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. WILLIAM STAMBAUGH

Mailing Address **511 NORTH MANCHESTER STREET**

City	State	Zip Code
ARLINGTON	VA	22203-1038

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27125**

Amount of Each Receipt this Period

500.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
BRIAN D STANLEY

Mailing Address **4500 PECAN MEADOW CT**

City **FORT WORTH** State **TX** Zip Code **76140**

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
04 / 15 / 2014

Transaction ID : **SA11AI.28608**

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
ROBERT STEWART

Mailing Address **2655 SOUTHWEST 164TH PLACE**

City **BURIEN** State **WA** Zip Code **98166-3123**

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
05 / 14 / 2014

Transaction ID : **SA11AI.27325**

Amount of Each Receipt this Period

300.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
RUTH STEYN

Mailing Address **3356 WHIPPOORWILL LANE**

City **OXFORD** State **MS** Zip Code **38655-5311**

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
395.00

Date of Receipt
04 / 08 / 2014

Transaction ID : **SA11AI.24791**

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

600.00

600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 119 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
ROBERT M STONE

Mailing Address **45 MYRTLEWOOD LANE**

City LAUREL	State MS	Zip Code 39443
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
---	---

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
04 / **14** / **2014**

Transaction ID : **SA11AI.25262**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
RICHARD STROUP

Mailing Address **6455 ALMADEN EXPRESSWAY #103**

City SAN JOSE	State CA	Zip Code 95120
-------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
04 / **23** / **2014**

Transaction ID : **SA11AI.30857**

Amount of Each Receipt this Period
500.00

INSURANCE AGENT

C. Full Name (Last, First, Middle Initial)
ACHIM SUIT

Mailing Address **435 SANLENAY CT**

City BILOXI	State MS	Zip Code 39531
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation CONSULTANT
--	---------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
04 / **23** / **2014**

Transaction ID : **SA11AI.30989**

Amount of Each Receipt this Period
50.00

IT CONSULTANT

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

14020400450

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 120 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
ACHIM SUIT

A. Mailing Address **435 SANLENAY CT**

City **BILOXI** State **MS** Zip Code **39531**

FEC ID number of contributing federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
CONSULTANT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

375.00

Date of Receipt

05 / 06 / 2014

Transaction ID : **SA11AI.26734**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
ANDREW SULLIVAN

B. Mailing Address **7748 WESTERN AVENUE**

City **OMAHA** State **NE** Zip Code **68114-1760**

FEC ID number of contributing federal political committee.

C

Name of Employer
MARRIOTT INTERNATIONAL

Occupation
TECH SUPPORT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

05 / 01 / 2014

Transaction ID : **SA11AI.26584**

Amount of Each Receipt this Period

20.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)
ANDREW SULLIVAN

C. Mailing Address **7748 WESTERN AVENUE**

City **OMAHA** State **NE** Zip Code **68114-1760**

FEC ID number of contributing federal political committee.

C

Name of Employer
MARRIOTT INTERNATIONAL

Occupation
TECH SUPPORT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

305.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.26959**

Amount of Each Receipt this Period

30.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

14020400451

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 121 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. ANDREW SULLIVAN			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 7748 WESTERN AVENUE			Transaction ID : SA11AI.27317	
City OMAHA	State NE	Zip Code 68114-1760	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer MARRIOTT INTERNATIONAL		Occupation TECH SUPPORT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 340.00		
Full Name (Last, First, Middle Initial) B. RAYMOND SUTER			Date of Receipt MM / DD / YYYY 04 / 24 / 2014	
Mailing Address 7010 NW 95TH AVE			Transaction ID : SA11AI.26256	
City TAMARAC	State FL	Zip Code 33321-3045	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH SENATE CONSERVATIVES FUND	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400.00		
Full Name (Last, First, Middle Initial) C. RICHARD SWENSON			Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
Mailing Address 7011 W SANDPIPER CT			Transaction ID : SA11AI.26984	
City MILWAUKEE	State WI	Zip Code 53223-2754	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			EARMARKED THROUGH CLUB FOR GROWTH	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00		
SUBTOTAL of Receipts This Page (optional).....			160.00	
TOTAL This Period (last page this line number only).....				

14020400452

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
RON SWINDALL

Mailing Address **P.O. BOX 1283**

City State Zip Code
LAUREL MS 30441

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

04 / 23 / 2014

Transaction ID : **SA11AI.26027**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)
MARK SWISHER

Mailing Address **24902 N POINT PL**

City State Zip Code
KATY TX 77494-3930

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
AMBASSADOR PETROLEUM ENGINEER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

04 / 11 / 2014

Transaction ID : **SA11AI.25097**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)
BRADLEY TANGEN

Mailing Address **606 GREG DR**

City State Zip Code
PARAGOULD AR 72450-2368

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
PAXTON MEDIA MOTOR CARRIER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

05 / 13 / 2014

Transaction ID : **SA11AI.26914**

Amount of Each Receipt this Period

400.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 123 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) MARILYN J. TAYLOR		Date of Receipt MM / DD / YYYY 04 / 14 / 2014
Mailing Address 804 TOBACCOPORT RD.		Transaction ID : SA11AI.25213
City BUMPUS MILLS	State TN	Zip Code 37028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED TEACHER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1800.00	

Full Name (Last, First, Middle Initial) MARILYN J. TAYLOR		Date of Receipt MM / DD / YYYY 04 / 22 / 2014
Mailing Address 804 TOBACCOPORT RD.		Transaction ID : SA11AI.29028
City BUMPUS MILLS	State TN	Zip Code 37028
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer RETIRED	Occupation RETIRED TEACHER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) MR MICHAEL E THOMAS		Date of Receipt MM / DD / YYYY 04 / 15 / 2014
Mailing Address 1040 HASTINGS CT		Transaction ID : SA11AI.28560
City GREENSBORO	State GA	Zip Code 30642
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1700.00
TOTAL This Period (last page this line number only).....	

14020400454

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MR MICHAEL E THOMAS
Mailing Address **1040 HASTINGS CT**

City State Zip Code
GREENSBORO GA 30642

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

575.00

Date of Receipt

05 / 07 / 2014

Transaction ID : **SA11AI.29964**

Amount of Each Receipt this Period

75.00

B. Full Name (Last, First, Middle Initial)
JOHN R TODD
Mailing Address **1070 BELLA VISTA ST**

City State Zip Code
PALM SPRINGS CA 92264

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27300**

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
DAVID TOFSTED
Mailing Address **PO BOX 123**

City State Zip Code
WHITE SANDS NM 88002-0123

FEC ID number of contributing
federal political committee.

C

Name of Employer
US ARMY

Occupation
PHYSICIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

04 / 30 / 2014

Transaction ID : **SA11AI.26572**

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1175.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 125 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
TARZAN TREADWAY II

Mailing Address 1413 ASH ST.

City OCEAN SPRINGS	State MS	Zip Code 39564
------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HARD ROCK BILOXI	Occupation SLOT OPERATIONS MANAGER
---	--

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
04 / **23** / **2014**

Transaction ID : **SA11AI.30990**

Amount of Each Receipt this Period
35.00
SLOT OPERATIONS MANAGER

B. Full Name (Last, First, Middle Initial)
RICHARD UIHLEIN

Mailing Address 1396 N WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ULINE	Occupation CEO/OWNER
----------------------------------	--------------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
04 / **04** / **2014**

Transaction ID : **SA11AI.24395**

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
RICHARD UIHLEIN

Mailing Address 1396 N WAUKEGAN RD

City LAKE FOREST	State IL	Zip Code 60045
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ULINE	Occupation CEO/OWNER
----------------------------------	--------------------------------

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
04 / **04** / **2014**

Transaction ID : **SA11AI.30590**

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5235.00

14020400456

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MARY ANN VANDERBROOK

Mailing Address **16487 TIMBER LANE**

City State Zip Code
NEW BUFFALO MI 49117

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

04 / 29 / 2014

Transaction ID : **SA11AI.26544**

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
MARCIA VANDER EEMS

Mailing Address **524 HOPPER AVENUE**

City State Zip Code
WYCKOFF NJ 07481-2910

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11AI.27207**

Amount of Each Receipt this Period

300.00

EARMARKED THROUGH CLUB FOR GROWTH

C. Full Name (Last, First, Middle Initial)
MATHEW C VANDERKOP

Mailing Address **1704 PARKSIDE DR**

City State Zip Code
PASADENA TX 77502

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

04 / 16 / 2014

Transaction ID : **SA11AI.28643**

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 127 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
MATHEW C VANDERKOP

Mailing Address 1704 PARKSIDE DR

City PASADENA State TX Zip Code 77502

FEC ID number of contributing federal political committee.. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 400.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2014

Transaction ID : SA11AI.29346

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
DAVID VANEVRY

Mailing Address P.O. BOX 229

City COLUMBUS State MS Zip Code 39703

FEC ID number of contributing federal political committee.. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2014

Transaction ID : SA11AI.26738

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
PAUL VOEGELI

Mailing Address P.O. BOX 538

City MONROE State WI Zip Code 53566-0538

FEC ID number of contributing federal political committee.. **C**

Name of Employer SELF EMPLOYED Occupation LAWYER

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2014

Transaction ID : SA11AI.27270

Amount of Each Receipt this Period
150.00
EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

<p>Full Name (Last, First, Middle Initial) ELBRIDGE WALKER</p>			<p>Date of Receipt MM / DD / YYYY 04 / 23 / 2014</p>		
<p>A. Mailing Address 30588 N MILLER RD.</p>			<p>Transaction ID : SA11AI.30801</p>		
City SCOTTSDALE	State AZ	Zip Code 85266	<p>Amount of Each Receipt this Period 500.00</p>		
FEC ID number of contributing federal political committee. C		<p>REAL ESTATE DEV./COMM'L FISHING</p>			
Name of Employer		Occupation		<p>500.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 500.00</p>			
<p>Full Name (Last, First, Middle Initial) PHILIP WARTH</p>			<p>Date of Receipt MM / DD / YYYY 05 / 14 / 2014</p>		
<p>B. Mailing Address 300 GRANDVIEW COURT UNIT 341</p>			<p>Transaction ID : SA11AI.27003</p>		
City HILTON HEAD ISLAND	State SC	Zip Code 29926-3901	<p>Amount of Each Receipt this Period 2000.00</p>		
FEC ID number of contributing federal political committee. C		<p>EARMARKED THROUGH CLUB FOR GROWTH</p>			
Name of Employer INFORMATION REQUESTED PER BEST EFFC		Occupation MANAGER		<p>2000.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 2000.00</p>			
<p>Full Name (Last, First, Middle Initial) SCOTT WEBER</p>			<p>Date of Receipt MM / DD / YYYY 04 / 23 / 2014</p>		
<p>C. Mailing Address 2601 SUNSET BLVD Apt 3G</p>			<p>Transaction ID : SA11AI.26071</p>		
City MINNEAPOLIS	State MN	Zip Code 55416	<p>Amount of Each Receipt this Period 2600.00</p>		
FEC ID number of contributing federal political committee. C		<p>INFORMATION REQUESTED PER BEST EFFC</p>			
Name of Employer INFORMATION REQUESTED PER BEST EFFC		Occupation INFORMATION REQUESTED PER BEST EFFC		<p>2600.00</p>	
<p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Election Cycle-to-Date 2600.00</p>			
<p>SUBTOTAL of Receipts This Page (optional).....</p>			<p>5100.00</p>		
<p>TOTAL This Period (last page this line number only).....</p>			<p></p>		

14020400459

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 129 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
STEVE WELKER

Mailing Address 10155 GROVE LN

City COOPER CITY	State FL	Zip Code 33328-4008
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
351.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2014

Transaction ID : SA11AI.24196

Amount of Each Receipt this Period
53.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

B. Full Name (Last, First, Middle Initial)
STEVE WELKER

Mailing Address 10155 GROVE LN

City COOPER CITY	State FL	Zip Code 33328-4008
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
451.00

Date of Receipt
MM / DD / YYYY
04 / 08 / 2014

Transaction ID : SA11AI.24866

Amount of Each Receipt this Period
100.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

C. Full Name (Last, First, Middle Initial)
THOMAS WEST

Mailing Address 16408 FREEMONT LN

City PURCELLVILLE	State VA	Zip Code 20132-9640
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ONE THING	Occupation ENGINEER
-------------------------------	------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
04 / 22 / 2014

Transaction ID : SA11AI.25925

Amount of Each Receipt this Period
300.00

EARMARKED THROUGH SENATE CONSERVATIVES FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

453.00

14020400460

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 130 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) JON WILKINS		Date of Receipt MM / DD / YYYY 05 / 14 / 2014	
A. Mailing Address 1763 LAKE BERRY DR		Transaction ID : SA11AI.26973	
City WINTER PARK	State FL	Zip Code 32789-5911	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer SELF-EMPLOYED		Occupation DENTIST	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 225.00	
Full Name (Last, First, Middle Initial) DARELL G WILLIAMS		Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
B. Mailing Address PO BOX 352		Transaction ID : SA11AI.26066	
City WAYNESBORO	State MS	Zip Code 39367	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFC		Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
Full Name (Last, First, Middle Initial) DARELL G WILLIAMS		Date of Receipt MM / DD / YYYY 04 / 23 / 2014	
C. Mailing Address PO BOX 352		Transaction ID : SA11AI.26100	
City WAYNESBORO	State MS	Zip Code 39367	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 48.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFC		Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 548.00	
SUBTOTAL of Receipts This Page (optional).....		598.00	
TOTAL This Period (last page this line number only).....			

14020400461

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 131 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
KENNETH O WILLIAMS

Mailing Address **11 CLUB DR**

City **NATCHEZ** State **MS** Zip Code **39120**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
04 / 17 / 2014

Transaction ID : **SA11AI.25438**

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
DANIEL SCOTT WILSON

Mailing Address **P.O. BOX 2034**

City **LAUREL** State **MS** Zip Code **39442-2034**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CPA**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
04 / 02 / 2014

Transaction ID : **SA11AI.27568**

Amount of Each Receipt this Period

200.00

CPA

C. Full Name (Last, First, Middle Initial)
DANIEL SCOTT WILSON

Mailing Address **P.O. BOX 2034**

City **LAUREL** State **MS** Zip Code **39442-2034**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CPA**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
04 / 11 / 2014

Transaction ID : **SA11AI.28266**

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

14020400462

SCHEDULE A (FEC Form 3)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 OF 238

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

DANIEL SCOTT WILSON

A.

Mailing Address P.O. BOX 2034

City

LAUREL

State

MS

Zip Code

39442-2034

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
CPA

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.27083

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)

MR. GEORGE DAVID WILSON

B.

Mailing Address 50878 BABEL SLOUGH RD

City

CLARKSBURG

State

CA

Zip Code

95612

FEC ID number of contributing
federal political committee.

C

Name of Employer
WILSON FARMS

Occupation
FARMER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

05 / 14 / 2014

Transaction ID : SA11AI.27100

Amount of Each Receipt this Period

100.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)

CHARLES H WITMER

C.

Mailing Address 11353 TURTLE BEACH RD

City

NORTH PALM BEACH

State

FL

Zip Code

33408

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

04 / 23 / 2014

Transaction ID : SA11AI.26068

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 133 OF 238	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
PAULETTE WOMACK

Mailing Address 1214 WOMACK RD

City UTICA	State MS	Zip Code 39175
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
MM / DD / YYYY
04 / 14 / 2014

Transaction ID : SA11AI.25258

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
LOUIS WOODHILL

Mailing Address 7 HAMPTON CT

City HOUSTON	State TX	Zip Code 77024
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DIGABIT, INC.	Occupation DIRECTOR
-----------------------------------	------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2014

Transaction ID : SA11AI.25006

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CHARLES WYCHUNAS

Mailing Address 9902 SOUTH THOMAS DRIVE UNIT 828

City PANAMA CITY	State FL	Zip Code 32408-1233
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ATT	Occupation SYS TECH
-------------------------	------------------------

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
MM / DD / YYYY
05 / 14 / 2014

Transaction ID : SA11AI.26998

Amount of Each Receipt this Period
200.00

EARMARKED THROUGH CLUB FOR GROWTH

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

14020400464

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 OF 238
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

BRADFORD WYSONG

A.

Mailing Address **2707 CLUBLAKE TRAIL**

City

MCKINNEY

State

TX

Zip Code

75070-4009

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PUBLIC SPEAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

05 / 14 / 2014

Transaction ID : **SA11A1.27173**

Amount of Each Receipt this Period

500.00

EARMARKED THROUGH CLUB FOR GROWTH

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

165208.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

A. Full Name (Last, First, Middle Initial)
EAGLE FORUM PAC

Mailing Address **P.O. BOX 618**

City **ALTON** State **IL** Zip Code **62002**

FEC ID number of contributing federal political committee. **C C00103937**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
04 / 14 / 2014

Transaction ID : **SA11C.25265**

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION FOR GUN RIGHTS INC PAC

Mailing Address **501 E. MAIN STREET SUITE 200**

City **WINDSOR** State **CO** Zip Code **80550**

FEC ID number of contributing federal political committee. **C C00481200**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
04 / 29 / 2014

Transaction ID : **SA11C.26514**

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
WAYNE COUNTY REPUBLICAN COMMITTEE

Mailing Address **PO BOX 3**

City **BUCKATUNNA** State **MS** Zip Code **39322**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **697.00**

Date of Receipt
04 / 23 / 2014

Transaction ID : **SA11C.26031**

Amount of Each Receipt this Period

697.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

7697.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY INC.'S LIBERTY ACTION FUND

Mailing Address 3030 CLARENDON BLVD SUITE 200

City State Zip Code
ARLINGTON VA 22201

FEC ID number of contributing federal political committee. **C** C00508739

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
988.00

Date of Receipt

04 / 17 / 2014

Transaction ID : SA11C.25460

Amount of Each Receipt this Period

310.00

Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY INC.'S LIBERTY ACTION FUND

Mailing Address 3030 CLARENDON BLVD SUITE 200

City State Zip Code
ARLINGTON VA 22201

FEC ID number of contributing federal political committee. **C** C00508739

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1278.00

Date of Receipt

04 / 24 / 2014

Transaction ID : SA11C.26339

Amount of Each Receipt this Period

290.00

Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY INC.'S LIBERTY ACTION FUND

Mailing Address 3030 CLARENDON BLVD SUITE 200

City State Zip Code
ARLINGTON VA 22201

FEC ID number of contributing federal political committee. **C** C00508739

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1581.00

Date of Receipt

04 / 24 / 2014

Transaction ID : SA11C.26344

Amount of Each Receipt this Period

303.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

903.00

8600.00

14020400467

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. 35-55 TRUCK STOP

Mailing Address HIGHWAY 35

City VAIDEN State MS Zip Code 39176

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2014

Amount of Each Disbursement this Period

271.66

Transaction ID : SB17.30427

Full Name (Last, First, Middle Initial)

B. DON ABERNATHY

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.30146

Full Name (Last, First, Middle Initial)

C. ADOLPHUS HOTEL

Mailing Address 1321 COMMERCE ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

141.77

Transaction ID : SB17.30430

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1413.43

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. ADOLPHUS HOTEL

Mailing Address 1321 COMMERCE ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement
 TRAVEL: LODGING

Candidate Name

Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
 04 / 28 / 2014

Amount of Each Disbursement this Period

183.58

Transaction ID : SB17.30431

Full Name (Last, First, Middle Initial)

B. SAM ALBRITON

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
 PAYROLL

Candidate Name

Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
 04 / 15 / 2014

Amount of Each Disbursement this Period

750.00

Transaction ID : SB17.30127

Full Name (Last, First, Middle Initial)

C. ALLEN HAMILTON

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
 TRAVEL: FUEL

Candidate Name

Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
 05 / 09 / 2014

Amount of Each Disbursement this Period

426.00

Transaction ID : SB17.30395

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1359.58

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

398.00

Transaction ID : SB17.30359

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

398.00

Transaction ID : SB17.30360

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

398.00

Transaction ID : SB17.30361

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1194.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. BFAC, LLC			Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> MM / DD / YYYY </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 04 / 14 / 2014 </div>	
Mailing Address 805 S WHEATLEY ST			Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1400.00 </div> Transaction ID : SB17.30351	
City RIDGELAND State MS Zip Code 39157				
Purpose of Disbursement SOFTWARE				
Candidate Name Category/ Type				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:				
Full Name (Last, First, Middle Initial) B. BILOXI BEACH RENTAL			Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> MM / DD / YYYY </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 04 / 08 / 2014 </div>	
Mailing Address 2230 BEACH DRIVE SUITE A			Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 246.40 </div> Transaction ID : SB17.30433	
City GULFPORT State MS Zip Code 39507				
Purpose of Disbursement TRAVEL: LODGING				
Candidate Name Category/ Type				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:				
Full Name (Last, First, Middle Initial) C. BILOXI BEACH RENTAL			Date of Disbursement <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> MM / DD / YYYY </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 04 / 18 / 2014 </div>	
Mailing Address 2230 BEACH DRIVE SUITE A			Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 134.40 </div> Transaction ID : SB17.30434	
City GULFPORT State MS Zip Code 39507				
Purpose of Disbursement TRAVEL: LODGING				
Candidate Name Category/ Type				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:				
SUBTOTAL of Disbursements This Page (optional).....			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1780.80 </div>	
TOTAL This Period (last page this line number only).....			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. KENNY BOONE

Mailing Address P.O. BOX 125

City State Zip Code
LAUREL MS 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.30153

Full Name (Last, First, Middle Initial)

B. SCOTT BREWSTER

Mailing Address 806 HIGHLAND COURT

City State Zip Code
BRANDON MS 39047

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.30159

Full Name (Last, First, Middle Initial)

C. BULL MARKET

Mailing Address 3905 GOODMAN RD E

City State Zip Code
SOUTHAVEN MS 38672

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.30535

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3100.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial) A. RICHARD J. BURKE		Date of Disbursement MM / DD / YYYY 04 / 22 / 2014	
Mailing Address 5 OVACHITA ST.		Amount of Each Disbursement this Period 1000.00	
City NATCHEZ	State MS	Zip Code 39120	Transaction ID : SB17.30157
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Full Name (Last, First, Middle Initial) B. KEVIN BURR		Date of Disbursement MM / DD / YYYY 04 / 16 / 2014	
Mailing Address P.O. BOX 125		Amount of Each Disbursement this Period 1000.00	
City LAUREL	State MS	Zip Code 39441	Transaction ID : SB17.30154
Purpose of Disbursement PAYROLL	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Full Name (Last, First, Middle Initial) C. BWC PHONEBOOTH		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014	
Mailing Address 809 TATE STREET		Amount of Each Disbursement this Period 72.59	
City CORINTH	State MS	Zip Code 38834	Transaction ID : SB17.30371
Purpose of Disbursement MOBILE PHONE EXPENSE	Category/ Type		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
SUBTOTAL of Disbursements This Page (optional).....		2072.59	
TOTAL This Period (last page this line number only).....			

14020400473

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CAMPAIGN RESEARCH ASSOC., LLC

Mailing Address 6582 IRVINE CT

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

3814.83

Transaction ID : SB17.30338

B. THERESA CARDENES

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.30134

C. THERESA CARDENES

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
TRAVEL: OTHER: SEE MEMOS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

205.38

Transaction ID : SB17.30135

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

6020.21

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. THERESA CARDENES

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

244.40

Transaction ID : SB17.30136

Full Name (Last, First, Middle Initial)

B. CENTERPOINT ENERGY

Mailing Address 1111 LOUISIANA ST
11TH FLOOR

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

90.88

Transaction ID : SB17.30318

Full Name (Last, First, Middle Initial)

C. CENTERPOINT ENERGY

Mailing Address 1111 LOUISIANA ST
11TH FLOOR

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

90.88

Transaction ID : SB17.30319

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

426.16

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CRAIG CHESEK

Mailing Address P.O. BOX 125

City
LAUREL

State
MS

Zip Code
39441

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.30144

B. CHEVRON

Mailing Address 6001 BOLLINGER CANYON ROAD

City

SAN RAMON

State

CA

Zip Code

94583

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.30539

C. CITY OF LAUREL PUBLIC UTILITY

Mailing Address 401 N 5TH AVE

City

LAUREL

State

MS

Zip Code

39440

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

68.92

Transaction ID : SB17.30322

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2693.92

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CITY OF LAUREL PUBLIC UTILITY

Mailing Address 401 N 5TH AVE

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

68.92

Transaction ID : SB17.30323

Full Name (Last, First, Middle Initial)

B. CITY OF LAUREL PUBLIC UTILITY

Mailing Address 401 N 5TH AVE

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2014

Amount of Each Disbursement this Period

68.92

Transaction ID : SB17.30324

Full Name (Last, First, Middle Initial)

C. T.J. CLAYTON

Mailing Address 1163 IMMANUEL ROAD

City PONTOTOC State MS Zip Code 38863

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2014

Amount of Each Disbursement this Period

211.20

Transaction ID : SB17.30133

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

349.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

176.25

Transaction ID : SB17.30544

B. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

51.87

Transaction ID : SB17.30545

C. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

8.12

Transaction ID : SB17.30546

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

236.24

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

184.99

Transaction ID : SB17.30547

B. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

376.75

Transaction ID : SB17.30548

C. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

110.45

Transaction ID : SB17.30549

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

672.19

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

231.12

Transaction ID : SB17.30550

B. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2014

Amount of Each Disbursement this Period

318.12

Transaction ID : SB17.30261

C. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

18.75

Transaction ID : SB17.30262

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

567.99

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

25.87

Transaction ID : SB17.30263

B. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

92.07

Transaction ID : SB17.30264

C. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

133.00

Transaction ID : SB17.30265

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

250.94

14020400481

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Amount of Each Disbursement this Period

70.62

Transaction ID : SB17.30266

Full Name (Last, First, Middle Initial)

B. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Amount of Each Disbursement this Period

21.75

Transaction ID : SB17.30267

Full Name (Last, First, Middle Initial)

C. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Amount of Each Disbursement this Period

284.50

Transaction ID : SB17.30268

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

376.87

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Amount of Each Disbursement this Period

72.77

Transaction ID : SB17.30269

B. CLUB FOR GROWTH

Mailing Address 201 L STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Amount of Each Disbursement this Period

4.37

Transaction ID : SB17.30270

C. CMV INVESTIGATIONS, LLC

Mailing Address P.O. BOX 7466

City D'IBERVILLE State MS Zip Code 39540

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.30340

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1077.14

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. COLD SPARK MEDIA

Mailing Address 307 FOURTH AVE
SUITE 920

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2014

Amount of Each Disbursement this Period

55370.00

Transaction ID : SB17.30295

B. COLD SPARK MEDIA

Mailing Address 307 FOURTH AVE
SUITE 920

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

1008.38

Transaction ID : SB17.30296

C. COLD SPARK MEDIA

Mailing Address 307 FOURTH AVE
SUITE 920

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

55370.00

Transaction ID : SB17.30297

SUBTOTAL of Disbursements This Page (optional)

111748.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. COLD SPARK MEDIA

Mailing Address 307 FOURTH AVE
SUITE 920

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2014

Amount of Each Disbursement this Period

55370.00

Transaction ID : SB17.30298

Full Name (Last, First, Middle Initial)

B. COLD SPARK MEDIA

Mailing Address 307 FOURTH AVE
SUITE 920

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

1220.44

Transaction ID : SB17.30299

Full Name (Last, First, Middle Initial)

C. COLD SPARK MEDIA

Mailing Address 307 FOURTH AVE
SUITE 920

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

87230.00

Transaction ID : SB17.30300

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

143820.44

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. COLD SPARK MEDIA

Mailing Address 307 FOURTH AVE
SUITE 920

City PITTSBURGH State PA Zip Code 15222

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2014

Amount of Each Disbursement this Period

1871.80

Transaction ID : SB17.30301

Category/
Type

Full Name (Last, First, Middle Initial)

B. COMCAST

Mailing Address 5915 I 55 NORTH

City JACKSON State MS Zip Code 39213

Purpose of Disbursement
BROADBAND SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2014

Amount of Each Disbursement this Period

476.09

Transaction ID : SB17.30326

Category/
Type

Full Name (Last, First, Middle Initial)

C. COMFORT SUITES

Mailing Address 121 HOSPITALITY DRIVE

City FLOWOOD State MS Zip Code 39232

Purpose of Disbursement
FRITSCH: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

601.65

Transaction ID : SB17.30124

[MEMO ITEM]

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2347.89

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. COMMUNITY BANK

Mailing Address 909 NORTH 16TH AVENUE

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2014

Amount of Each Disbursement this Period

4.00

Transaction ID : SB17.30171

Full Name (Last, First, Middle Initial)

B. COUNTRY CREEK RV SUPER CENTER

Mailing Address 7696 U S HIGHWAY 49

City HATTIESBURG State MS Zip Code 39402

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

1474.16

Transaction ID : SB17.30424

Full Name (Last, First, Middle Initial)

C. COURTYARD

Mailing Address 6280 RIDGEWOOD COURT DRIVE

City JACKSON State MS Zip Code 39211

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

124.26

Transaction ID : SB17.30437

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1602.42

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. COURTYARD

Mailing Address 6280 RIDGEWOOD COURT DRIVE

City JACKSON State MS Zip Code 39211

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

138.56

Transaction ID : SB17.30438

B. CREATIVE COMPUTER

Mailing Address P.O. BOX 6648

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

53.50

Transaction ID : SB17.30304

C. CREATIVE COMPUTER

Mailing Address P.O. BOX 6648

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

53.50

Transaction ID : SB17.30305

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

245.56

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CREATIVE COMPUTER

Mailing Address P.O. BOX 6648

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

5262.79

Transaction ID : SB17.30306

B. DALLAS PRINTING

Mailing Address 2201 MAIN ST #810

City DALLAS State TX Zip Code 75201

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

856.96

Transaction ID : SB17.30307

C. DALLAS PRINTING

Mailing Address 2201 MAIN ST #810

City DALLAS State TX Zip Code 75201

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Amount of Each Disbursement this Period

155.15

Transaction ID : SB17.30308

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

6274.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. DONORBUREAU

Mailing Address 1900 N CULPEPER ST

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement
STATISTICAL MODELING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

584.26

Transaction ID : SB17.30513

B. DONORBUREAU

Mailing Address 1900 N CULPEPER ST

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement
STATISTICAL MODELING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

275.33

Transaction ID : SB17.30527

C. DRURY INNS

Mailing Address 735 W GOODMAN RD

City HORN LAKE State MS Zip Code 38637

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

133.03

Transaction ID : SB17.30441

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

992.62

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT-A-CAR

Mailing Address 3621 BLUE HERON BLVD W

City RIVIERA BEACH State FL Zip Code 33404-4901

Purpose of Disbursement
TRAVEL: CAR RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

449.56

Transaction ID : SB17.30365

Full Name (Last, First, Middle Initial)

B. ENTERPRISE RENT-A-CAR

Mailing Address 3621 BLUE HERON BLVD W

City RIVIERA BEACH State FL Zip Code 33404-4901

Purpose of Disbursement
TRAVEL: CAR RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2014

Amount of Each Disbursement this Period

118.40

Transaction ID : SB17.30366

Full Name (Last, First, Middle Initial)

C. ENTERPRISE RENT-A-CAR

Mailing Address 3621 BLUE HERON BLVD W

City RIVIERA BEACH State FL Zip Code 33404-4901

Purpose of Disbursement
TRAVEL: CAR RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Amount of Each Disbursement this Period

122.08

Transaction ID : SB17.30367

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

690.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT-A-CAR

Mailing Address 3621 BLUE HERON BLVD W

City RIVIERA BEACH State FL Zip Code 33404-4901

Purpose of Disbursement
TRAVEL: CAR RENTAL

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Amount of Each Disbursement this Period

122.08

Transaction ID : SB17.30368

Full Name (Last, First, Middle Initial)

B. ERIN ROSE

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

506.40

Transaction ID : SB17.30491

Full Name (Last, First, Middle Initial)

C. EXXONMOBIL

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039-2298

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

83.74

Transaction ID : SB17.30396

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

712.22

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. EXXONMOBIL

Mailing Address 5959 LAS COLINAS BOULEVARD

City IRVING State TX Zip Code 75039-2298

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.30397

B. FACEBOOK INC.

Mailing Address 1601 WILLOW RD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2014

Amount of Each Disbursement this Period

525.05

Transaction ID : SB17.30207

C. FACEBOOK INC.

Mailing Address 1601 WILLOW RD

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2014

Amount of Each Disbursement this Period

750.37

Transaction ID : SB17.30208

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1375.42

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. FACEBOOK INC.

Mailing Address 1601 WILLOW RD

City State Zip Code
MENLO PARK CA 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2014

Amount of Each Disbursement this Period

750.14

Transaction ID : SB17.30209

B. FACEBOOK INC.

Mailing Address 1601 WILLOW RD

City State Zip Code
MENLO PARK CA 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

668.08

Transaction ID : SB17.30210

C. FACEBOOK INC.

Mailing Address 1601 WILLOW RD

City State Zip Code
MENLO PARK CA 94025

Purpose of Disbursement
ONLINE ADVERTISING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

675.00

Transaction ID : SB17.30211

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2093.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. FACL

Mailing Address 101 WASHINGTON STREET

City FALMOUTH State VA Zip Code 22405

Purpose of Disbursement
ROSE: TRAINING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

80.00

Transaction ID : SB17.30346

[MEMO ITEM]

B. FACL

Full Name (Last, First, Middle Initial)

Mailing Address 101 WASHINGTON STREET

City FALMOUTH State VA Zip Code 22405

Purpose of Disbursement
CARDENES: TRAINING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.30163

[MEMO ITEM]

C. FAST TRACK

Full Name (Last, First, Middle Initial)

Mailing Address 306 N FRONT STREET

City SANDERSVILLE State MS Zip Code 39477

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2014

Amount of Each Disbursement this Period

91.57

Transaction ID : SB17.30398

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

91.57

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. FREEDOM WORKS

Mailing Address 400 N. CAPITOL STREET, NW
SUITE 765

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
EVENT REGISTRATION FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

379.10

Transaction ID : SB17.30221

Full Name (Last, First, Middle Initial)

B. NOEL W FRITSCH

Mailing Address 5364 SUFFOLK DRIVE

City JACKSON State MS Zip Code 39211

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.30121

Full Name (Last, First, Middle Initial)

C. NOEL W FRITSCH

Mailing Address 5364 SUFFOLK DRIVE

City JACKSON State MS Zip Code 39211

Purpose of Disbursement
TRAVEL: LODGING: SEE MEMO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

601.65

Transaction ID : SB17.30122

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5980.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. STEPHEN FURNEY

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.30160

Full Name (Last, First, Middle Initial)

B. STEPHEN FURNEY

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.30129

Full Name (Last, First, Middle Initial)

C. STEPHEN FURNEY

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

573.70

Transaction ID : SB17.30130

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2073.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. GEM PUBLICATIONS, INC

Mailing Address P.O. BOX 87

City FLORA State MS Zip Code 39071

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2014

Amount of Each Disbursement this Period

171.20

Transaction ID : SB17.30309

Full Name (Last, First, Middle Initial)

B. GLOBAL PAYMENTS

Mailing Address 10705 RED RUN BLVD

City ROCKVILLE State MD Zip Code 20855

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2014

Amount of Each Disbursement this Period

57.04

Transaction ID : SB17.30524

Full Name (Last, First, Middle Initial)

C. LARRY GOFF

Mailing Address P.O. BOX 544

City ELLISVILLE State MS Zip Code 39437

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.30155

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2728.24

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. GRAVIS MARKETING INC

Mailing Address 910 BELLE AVE
STE #1180

City WINTER SPRINGS State FL Zip Code 32708

Purpose of Disbursement
MARKETING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

25000.00

Transaction ID : SB17.30242

Category/
Type

Full Name (Last, First, Middle Initial)

B. MARY E HAMIL

Mailing Address 169 OLD HWY 15 SOUTH

City ELLISVILLE State MS Zip Code 39437

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

1750.00

Transaction ID : SB17.30119

Category/
Type

Full Name (Last, First, Middle Initial)

C. ALLEN HAMILTON

Mailing Address 6000 POLLOCK FERRY RD

City MOSS POINT State MS Zip Code 39562

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.30142

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

27250.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HAMPTON INN JACKSONNORTH

Mailing Address 465 BRIARWOOD DR

City JACKSON State MS Zip Code 39206

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

90.68

Transaction ID : SB17.30445

Full Name (Last, First, Middle Initial)

B. HAMPTON INN JACKSONNORTH

Mailing Address 465 BRIARWOOD DR

City JACKSON State MS Zip Code 39206

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

90.68

Transaction ID : SB17.30446

Full Name (Last, First, Middle Initial)

C. HAMPTON INN JACKSONNORTH

Mailing Address 465 BRIARWOOD DR

City JACKSON State MS Zip Code 39206

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

102.46

Transaction ID : SB17.30447

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

283.82

14020400500

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HAMPTON INN JACKSONNORTH

Mailing Address 465 BRIARWOOD DR

City JACKSON State MS Zip Code 39206

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

102.46

Transaction ID : SB17.30448

Full Name (Last, First, Middle Initial)

B. HAMPTON INN JACKSONNORTH

Mailing Address 465 BRIARWOOD DR

City JACKSON State MS Zip Code 39206

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

102.46

Transaction ID : SB17.30449

Full Name (Last, First, Middle Initial)

C. HILTON GARDEN INN

Mailing Address 6671 TOWNE CENTER LOOP

City SOUTHAVEN State MS Zip Code 38671

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

108.16

Transaction ID : SB17.30452

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

313.08

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HILTON GARDEN INN

Mailing Address 6671 TOWNE CENTER LOOP

City SOUTHAVEN State MS Zip Code 38671

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

108.16

Transaction ID : SB17.30453

Full Name (Last, First, Middle Initial)

B. HILTON JACKSON MISSISSIPPI HOTEL

Mailing Address 1001 E COUNTY LINE RD

City JACKSON State MS Zip Code 39157

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

97.01

Transaction ID : SB17.30456

Full Name (Last, First, Middle Initial)

C. HILTON JACKSON MISSISSIPPI HOTEL

Mailing Address 1001 E COUNTY LINE RD

City JACKSON State MS Zip Code 39157

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

145.98

Transaction ID : SB17.30457

•SUBTOTAL of Disbursements This Page (optional)

351.15

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HILTON JACKSON MISSISSIPPI HOTEL

Mailing Address 1001 E COUNTY LINE RD

City JACKSON State MS Zip Code 39157

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

185.22

Transaction ID : SB17.30458

Category/
Type

Full Name (Last, First, Middle Initial)

B. HILTON JACKSON MISSISSIPPI HOTEL

Mailing Address 1001 E COUNTY LINE RD

City JACKSON State MS Zip Code 39157

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

194.17

Transaction ID : SB17.30459

Category/
Type

Full Name (Last, First, Middle Initial)

C. HILTON JACKSON MISSISSIPPI HOTEL

Mailing Address 1001 E COUNTY LINE RD

City JACKSON State MS Zip Code 39157

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

217.37

Transaction ID : SB17.30460

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

596.76

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 25 / 2014

Amount of Each Disbursement this Period

162.41

Transaction ID : SB17.30463

B. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 25 / 2014

Amount of Each Disbursement this Period

162.41

Transaction ID : SB17.30464

C. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 25 / 2014

Amount of Each Disbursement this Period

162.41

Transaction ID : SB17.30465

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

487.23

14020400504

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City BILOXI State MS Zip Code 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

125.35

Transaction ID : SB17.30466

B. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City BILOXI State MS Zip Code 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

125.35

Transaction ID : SB17.30467

C. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City BILOXI State MS Zip Code 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

125.35

Transaction ID : SB17.30468

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

376.05

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN

Mailing Address 11766 WILSHIRE BLVD
SUITE 1450

City LOS ANGELES State CA Zip Code 90025

Purpose of Disbursement
ROSE: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

104.00

Transaction ID : SB17.30349

[MEMO ITEM]

B. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City BILOXI State MS Zip Code 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

88.81

Transaction ID : SB17.30469

C. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City BILOXI State MS Zip Code 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

88.81

Transaction ID : SB17.30470

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

177.62

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

88.81

Transaction ID : SB17.30471

Full Name (Last, First, Middle Initial)

B. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

90.47

Transaction ID : SB17.30472

Full Name (Last, First, Middle Initial)

C. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

90.47

Transaction ID : SB17.30473

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

269.75

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Amount of Each Disbursement this Period

91.30

Transaction ID : SB17.30474

B. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Amount of Each Disbursement this Period

91.30

Transaction ID : SB17.30475

C. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

115.50

Transaction ID : SB17.30476

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

298.10

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

115.50

Transaction ID : SB17.30477

Full Name (Last, First, Middle Initial)

B. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

122.18

Transaction ID : SB17.30478

Full Name (Last, First, Middle Initial)

C. HOLIDAY INN

Mailing Address 11766 WILSHIRE BLVD
SUITE 1450

City State Zip Code
LOS ANGELES CA 90025

Purpose of Disbursement
CARDENES: TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

104.00

Transaction ID : SB17.30161

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

237.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

115.50

Transaction ID : SB17.30479

B. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

115.50

Transaction ID : SB17.30480

C. HOLIDAY INN

Mailing Address 1686 BEACH BLVD

City State Zip Code
BILOXI MS 39531

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

115.50

Transaction ID : SB17.30481

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

346.50

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HOMEWOOD SUITES

Mailing Address 853 CENTRE ST

City RIDGELAND State MS Zip Code 39157

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

117.72

Transaction ID : SB17.30484

B. HSP DIRECT

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
CREATIVE FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Amount of Each Disbursement this Period

1466.70

Transaction ID : SB17.30505

C. HSP DIRECT

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
CREATIVE FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

8343.90

Transaction ID : SB17.30528

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

9928.32

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HSP DIRECT

Mailing Address 13755 SUNRISE VALLEY DR.
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

174.10

Transaction ID : SB17.30560

Full Name (Last, First, Middle Initial)

B. IMAGE DIRECT

Mailing Address 200 MONROE AVENUE
BUILDING 4

City FREDERICK State MD Zip Code 21701

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

4353.45

Transaction ID : SB17.30551

Full Name (Last, First, Middle Initial)

C. IMAGE DIRECT

Mailing Address 200 MONROE AVENUE
BUILDING 4

City FREDERICK State MD Zip Code 21701

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

9.51

Transaction ID : SB17.30552

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

4537.06

14020400512

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. IMAGE DIRECT

Mailing Address 200 MONROE AVENUE
BUILDING 4

City State Zip Code
FREDERICK MD 21701

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

899.18

Transaction ID : SB17.30561

Full Name (Last, First, Middle Initial)

B. INGRAM SIGNS & SCREEN PRINTING

Mailing Address 7605 HIGHWAY 35 S

City State Zip Code
FOREST MS 39074-9480

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

1232.64

Transaction ID : SB17.30310

Full Name (Last, First, Middle Initial)

C. INGRAM SIGNS & SCREEN PRINTING

Mailing Address 7605 HIGHWAY 35 S

City State Zip Code
FOREST MS 39074-9480

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

1232.64

Transaction ID : SB17.30311

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3364.46

14020400513

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. INGRAM SIGNS & SCREEN PRINTING

Mailing Address 7605 HIGHWAY 35 S

City FOREST State MS Zip Code 39074-9480

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2014

Amount of Each Disbursement this Period

1232.64

Transaction ID : SB17.30312

B. INTEGRAM

Mailing Address 22695 COMMERCE CENTER COURT

City DULLAS State VA Zip Code 20166

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

4862.60

Transaction ID : SB17.30568

C. JERRY MICKEL

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.30493

SUBTOTAL of Disbursements This Page (optional).....

6345.24

TOTAL This Period (last page this line number only).....

14020400514

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. KANGAROO EXPRESS

Mailing Address 121 PINOLA DRIVE SE

City State Zip Code
MAGEE MS 39111

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.30540

B. KANGAROO EXPRESS

Mailing Address 121 PINOLA DRIVE SE

City State Zip Code
MAGEE MS 39111

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

266.34

Transaction ID : SB17.30249

C. KANGAROO EXPRESS

Mailing Address 121 PINOLA DRIVE SE

City State Zip Code
MAGEE MS 39111

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.30250

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

466.34

14020400515

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. KEVIN BURR

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

1513.99

Transaction ID : SB17.30497

Category/
Type

Full Name (Last, First, Middle Initial)

B. LAKELAND INCOME PROPERTIES, LLC

Mailing Address PO BOX 320219

City FLOWOOD State MS Zip Code 39232

Purpose of Disbursement
RENT & UTILITIES

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

1508.75

Transaction ID : SB17.30328

Category/
Type

Full Name (Last, First, Middle Initial)

C. LAKELAND INCOME PROPERTIES, LLC

Mailing Address PO BOX 320219

City FLOWOOD State MS Zip Code 39232

Purpose of Disbursement
RENT & UTILITIES

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

176.30

Transaction ID : SB17.30329

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3199.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. LAKELAND INCOME PROPERTIES, LLC

Mailing Address PO BOX 320219

City State Zip Code
FLOWOOD MS 39232

Purpose of Disbursement
RENT & UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Amount of Each Disbursement this Period

2362.14

Transaction ID : SB17.30330

B. LANDER'S CENTER

Mailing Address 4560 VENTURE DR

City State Zip Code
SOUTHAVEN MS 38671

Purpose of Disbursement
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2014

Amount of Each Disbursement this Period

881.90

Transaction ID : SB17.30227

C. LAURA'S LINENS & CATERING TOO!

Mailing Address 3104 AUDUBON DRIVE

City State Zip Code
LAUREL MS 39440

Purpose of Disbursement
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

2175.00

Transaction ID : SB17.30229

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5419.04

14020400517

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. LIBERTY ACTION CENTER

Mailing Address 1717 PENNSYLVIA AVE
SUITE 1025

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

2501.00

Transaction ID : SB17.30231

Full Name (Last, First, Middle Initial)

B. LIBERTY ACTION CENTER

Mailing Address 1717 PENNSYLVIA AVE
SUITE 1025

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

4999.00

Transaction ID : SB17.30232

Full Name (Last, First, Middle Initial)

C. LOS PARRILLEROS

Mailing Address 10775 NW 41ST ST

City DORAL State FL Zip Code 33178

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

78.94

Transaction ID : SB17.30258

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

7578.94

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. MAHAFFEYS' QUALITY PRINTING

Mailing Address 355 W PEARL ST

City JACKSON State MS Zip Code 39203

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Amount of Each Disbursement this Period

831.92

Transaction ID : SB17.30314

Full Name (Last, First, Middle Initial)

B. JIM MARLER

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
MOVING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2014

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.30141

Full Name (Last, First, Middle Initial)

C. DONNA MAXWELL

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.30147

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

5831.92

14020400519

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. RIC MCCLUSKEY

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.30156

Full Name (Last, First, Middle Initial)

B. RIC MCCLUSKEY

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2014

Amount of Each Disbursement this Period

299.20

Transaction ID : SB17.30125

Full Name (Last, First, Middle Initial)

C. MDI IMAGING & MAIL

Mailing Address 21955 CASCADES PARKWAY

City DULLES State VA Zip Code 20166

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

3719.97

Transaction ID : SB17.30554

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5019.17

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. MDI IMAGING & MAIL

Mailing Address 21955 CASCADES PARKWAY

City State Zip Code
DULLES VA 20166

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

216.01

Transaction ID : SB17.30562

Full Name (Last, First, Middle Initial)

B. JERRY MICKEL

Mailing Address P.O. BOX 125

City State Zip Code
LAUREL MS 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

428.00

Transaction ID : SB17.30151

Full Name (Last, First, Middle Initial)

C. MICROSOFT ONLINE

Mailing Address ONE MICROSOFT WAY

City State Zip Code
REDMOND WA 98052

Purpose of Disbursement
SOFTWARE

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

158.36

Transaction ID : SB17.30352

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

802.37

14020400521

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. MICROSOFT ONLINE

Mailing Address ONE MICROSOFT WAY

City REDMOND State WA Zip Code 98052

Purpose of Disbursement
SOFTWARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

158.64

Transaction ID : SB17.30353

B. MISSISSIPPI AGRICULTURE & FORESTRY MUSEUM

Mailing Address 1150 LAKELAND DR

City JACKSON State MS Zip Code 39216

Purpose of Disbursement
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2014

Amount of Each Disbursement this Period

800.00

Transaction ID : SB17.30234

C. MISSISSIPPI POWER

Mailing Address P.O. BOX 245

City BIRMINGHAM State AL Zip Code 35201-0245

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2014

Amount of Each Disbursement this Period

52.35

Transaction ID : SB17.30331

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1010.99

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. MISSISSIPPI POWER

Mailing Address P.O. BOX 245

City BIRMINGHAM State AL Zip Code 35201-0245

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2014

Amount of Each Disbursement this Period

187.05

Transaction ID : SB17.30332

Full Name (Last, First, Middle Initial)

B. MISSISSIPPI POWER

Mailing Address P.O. BOX 245

City BIRMINGHAM State AL Zip Code 35201-0245

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

94.60

Transaction ID : SB17.30333

Full Name (Last, First, Middle Initial)

C. MISSISSIPPI POWER

Mailing Address P.O. BOX 245

City BIRMINGHAM State AL Zip Code 35201-0245

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

94.60

Transaction ID : SB17.30334

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

376.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. MISSISSIPPI POWER

Mailing Address P.O. BOX 245

City BIRMINGHAM State AL Zip Code 35201-0245

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

94.60

Transaction ID : SB17.30335

B. MISSISSIPPI POWER

Mailing Address P.O. BOX 245

City BIRMINGHAM State AL Zip Code 35201-0245

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

159.09

Transaction ID : SB17.30336

C. MISSISSIPPI POWER

Mailing Address P.O. BOX 245

City BIRMINGHAM State AL Zip Code 35201-0245

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

123.39

Transaction ID : SB17.30337

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

377.08

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. MURPHY EXPRESS

Mailing Address 200 PEACH STREET

City State Zip Code
EL DORADO AR 71730

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.30543

B. MURPHY EXPRESS

Mailing Address 200 PEACH STREET

City State Zip Code
EL DORADO AR 71730

Purpose of Disbursement
TRAVEL: FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.30380

C. ROBBIE NICHOLS

Mailing Address 105 WALTHALL ST

City State Zip Code
GREENWOOD MS 38930-4426

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.30158

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1150.00

14020400525

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. NOVA LIST

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

8283.69

Transaction ID : SB17.30530

Full Name (Last, First, Middle Initial)

B. NOVA LIST

Mailing Address 13755 SUNRISE VALLEY DR.
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

2366.06

Transaction ID : SB17.30563

Full Name (Last, First, Middle Initial)

C. OFFICE DEPOT

Mailing Address 600 N MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

32.11

Transaction ID : SB17.30285

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

10681.86

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. OFFICE DEPOT

Mailing Address 600 N MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2014

Amount of Each Disbursement this Period

49.00

Transaction ID : SB17.30286

B. OFFICE DEPOT

Mailing Address 600 N MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 25 / 2014

Amount of Each Disbursement this Period

29.41

Transaction ID : SB17.30287

C. OFFICE DEPOT

Mailing Address 600 N MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement
CARDENES: OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

66.38

Transaction ID : SB17.30164

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

78.41

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. PARTY BOX RENTALS

Mailing Address 105 MARGARET AVE

City PETAL State MS Zip Code 39465

Purpose of Disbursement
EVENT STAGING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

508.25

Transaction ID : SB17.30225

Full Name (Last, First, Middle Initial)

B. JAMIE PEAVY

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.30150

Full Name (Last, First, Middle Initial)

C. PETTY CASH - DAWN WALTERS

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.30290

SUBTOTAL of Disbursements This Page (optional).....

3708.25

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. PETTY CASH - DAWN WALTERS

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.30291

B. PETTY CASH - DAWN WALTERS

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.30292

C. PETTY CASH - DAWN WALTERS

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2014

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.30293

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. PETTY CASH - DAWN WALTERS

Mailing Address PO BOX 125

City LAUREL State MS Zip Code 39441-0125

Purpose of Disbursement
PETTY CASH

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2014

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.30294

Full Name (Last, First, Middle Initial)

B. PINE BELT OIL

Mailing Address 5317 US HIGHWAY 49

City HATTIESBURG State MS Zip Code 39401

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

50.01

Transaction ID : SB17.30403

Full Name (Last, First, Middle Initial)

C. PIXELHOUSE MEDIA GROUP

Mailing Address 1222 GREYMONT AVE

City JACKSON State MS Zip Code 39202

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.30213

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1250.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. PIXELHOUSE MEDIA GROUP

Mailing Address 1222 GREYMONT AVE

City JACKSON State MS Zip Code 39202

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.30214

Category/
Type

Full Name (Last, First, Middle Initial)

B. KEITH PLUNKETT

Mailing Address P.O. BOX 155

City FLORA State MS Zip Code 39017

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.30152

Category/
Type

Full Name (Last, First, Middle Initial)

C. PULSE RED COMMUNICATIONS, LLC

Mailing Address 190 MONROE AVE NW
FIFTH FLOOR

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

6628.37

Transaction ID : SB17.30192

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

10628.37

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. RACEWAY GAS

Mailing Address 715 HIGHWAY 49 S

City RICHLAND State MS Zip Code 39218

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2014

Amount of Each Disbursement this Period

99.00

Transaction ID : SB17.30405

Category/
Type

Full Name (Last, First, Middle Initial)

B. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
FIRST FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Amount of Each Disbursement this Period

9954.28

Transaction ID : SB17.30196

Category/
Type

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET
FIRST FLOOR

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2014

Amount of Each Disbursement this Period

1080.67

Transaction ID : SB17.30197

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

11133.95

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.30178

B. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2014

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.30179

C. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2014

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.30180

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

20.00

14020400533

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.30181

Full Name (Last, First, Middle Initial)

B. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.30182

Full Name (Last, First, Middle Initial)

C. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2014

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.30183

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

20.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2014

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.30184

Full Name (Last, First, Middle Initial)

B. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.30185

Full Name (Last, First, Middle Initial)

C. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.30186

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

32.50

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

2.00

Transaction ID : SB17.30187

Full Name (Last, First, Middle Initial)

B. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.30188

Full Name (Last, First, Middle Initial)

C. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.30189

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

32.00

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. REGIONS BANK

Mailing Address 1415 WEST 5TH STREET

City LAUREL State MS Zip Code 39440

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.30190

Full Name (Last, First, Middle Initial)

B. ERIN ROSE

Mailing Address 13413 ST MARTIN DR

City OCEAN SPRINGS State MS Zip Code 39564

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.30148

Full Name (Last, First, Middle Initial)

C. SHELL

Mailing Address PO BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Amount of Each Disbursement this Period

95.00

Transaction ID : SB17.30406

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1610.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address PO BOX 2463

City State Zip Code
HOUSTON TX 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2014

Amount of Each Disbursement this Period

90.00

Transaction ID : SB17.30407

Full Name (Last, First, Middle Initial)

B. SHELL

Mailing Address PO BOX 2463

City State Zip Code
HOUSTON TX 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

39.03

Transaction ID : SB17.30408

Full Name (Last, First, Middle Initial)

C. SHELL

Mailing Address PO BOX 2463

City State Zip Code
HOUSTON TX 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

52.00

Transaction ID : SB17.30409

SUBTOTAL of Disbursements This Page (optional)

181.03

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address PO BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

74.48

Transaction ID : SB17.30410

B. SHELL

Mailing Address PO BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2014

Amount of Each Disbursement this Period

95.00

Transaction ID : SB17.30411

C. SHELL

Mailing Address PO BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2014

Amount of Each Disbursement this Period

82.16

Transaction ID : SB17.30412

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

251.64

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address PO BOX 2463

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Amount of Each Disbursement this Period

35.00

Transaction ID : SB17.30413

Category/
Type

Full Name (Last, First, Middle Initial)

B. MELANIE SOJOURNER

Mailing Address 12 OAKWOOD PLANTATION ROAD

City NATCHEZ State MS Zip Code 39120

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.30120

Category/
Type

Full Name (Last, First, Middle Initial)

C. SOUTHERN IMAGES

Mailing Address 121 NORTH 15TH AVE

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

102.71

Transaction ID : SB17.30315

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2637.71

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. SOUTHERN TIRE MART

Mailing Address 12045 SHRINER'S BLVD

City State Zip Code
BILOXI MS 39532

Purpose of Disbursement
TRAVEL: OTHER

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Amount of Each Disbursement this Period

804.53

Transaction ID : SB17.30501

Category/
Type

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES CO

Mailing Address 2702 LOVE FIELD DR

City State Zip Code
DALLAS TX 75235

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

616.00

Transaction ID : SB17.30362

Category/
Type

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES CO

Mailing Address 2702 LOVE FIELD DR

City State Zip Code
DALLAS TX 75235

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

616.00

Transaction ID : SB17.30363

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2036.53

14020400541

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES CO

Mailing Address 2702 LOVE FIELD DR

City State Zip Code
DALLAS TX 75235

Purpose of Disbursement
TRAVEL: AIR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2014

Amount of Each Disbursement this Period

616.00

Transaction ID : SB17.30364

Full Name (Last, First, Middle Initial)

B. SUNRISE DATA SERVICES

Mailing Address 44845 FALCON PLACE
STE 101-A

City State Zip Code
DULLES VA 20166

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

397.63

Transaction ID : SB17.30521

Full Name (Last, First, Middle Initial)

C. SUNRISE DATA SERVICES

Mailing Address 44845 FALCON PLACE
STE 101-A

City State Zip Code
DULLES VA 20166

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

45.00

Transaction ID : SB17.30522

SUBTOTAL of Disbursements This Page (optional)

1058.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. SUNRISE DATA SERVICES

Mailing Address 44845 FALCON PLACE
STE 101-A

City DULLES State VA Zip Code 20166

Purpose of Disbursement
DATA MANAGEMENT SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.30531

B. SUNRISE DATA SERVICES

Mailing Address 44845 FALCON PLACE
STE 101-A

City DULLES State VA Zip Code 20166

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

1492.18

Transaction ID : SB17.30532

C. SUNRISE DATA SERVICES

Mailing Address 44845 FALCON PLACE
STE 101-A

City DULLES State VA Zip Code 20166

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.30533

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1557.18

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. SUNRISE DATA SERVICES

Mailing Address 44845 FALCON PLACE
STE 101-A

City DULLES State VA Zip Code 20166

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.30555

Full Name (Last, First, Middle Initial)

B. SUNRISE DATA SERVICES

Mailing Address 44845 FALCON PLACE
STE 101-A

City DULLES State VA Zip Code 20166

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

385.00

Transaction ID : SB17.30556

Full Name (Last, First, Middle Initial)

C. SUNRISE DATA SERVICES

Mailing Address 44845 FALCON PLACE
STE 101-A

City DULLES State VA Zip Code 20166

Purpose of Disbursement
LIST RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

105.00

Transaction ID : SB17.30557

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

540.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. SUNRISE DATA SERVICES

Mailing Address 44845 FALCON PLACE
STE 101-A

City DULLES State VA Zip Code 20166

Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

70.00

Transaction ID : SB17.30564

B. CHRIS TAPIA

Mailing Address P.O. BOX 125

City LAUREL State MS Zip Code 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.30143

C. TELESOUTH COMMUNICATIONS, INC.

Mailing Address 6311 RIDGEWOOD ROAD

City JACKSON State MS Zip Code 39211

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Amount of Each Disbursement this Period

1545.00

Transaction ID : SB17.30194

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2615.00

14020400545

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. TEXACO

Mailing Address 4414 MEDGAR EVERS BLVD

City JACKSON State MS Zip Code 39213

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2014

Amount of Each Disbursement this Period

196.55

Transaction ID : SB17.30418

B. TEXACO

Mailing Address 4414 MEDGAR EVERS BLVD

City JACKSON State MS Zip Code 39213

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

261.51

Transaction ID : SB17.30419

C. TEXACO

Mailing Address 4414 MEDGAR EVERS BLVD

City JACKSON State MS Zip Code 39213

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Amount of Each Disbursement this Period

256.64

Transaction ID : SB17.30420

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

714.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. TEXACO

Mailing Address 4414 MEDGAR EVERS BLVD

City JACKSON State MS Zip Code 39213

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Amount of Each Disbursement this Period

257.83

Transaction ID : SB17.30421

B. TEXACO

Mailing Address 4414 MEDGAR EVERS BLVD

City JACKSON State MS Zip Code 39213

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.30422

C. TEXACO

Mailing Address 4414 MEDGAR EVERS BLVD

City JACKSON State MS Zip Code 39213

Purpose of Disbursement
TRAVEL: FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2014

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.30423

SUBTOTAL of Disbursements This Page (optional)

507.83

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. THE ALLUVIAN

Mailing Address 318 HOWARD ST

City GREENWOOD State MS Zip Code 38930

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
04	14	2014

Amount of Each Disbursement this Period

374.90

Transaction ID : SB17.30487

Category/
Type

Full Name (Last, First, Middle Initial)

B. THE RAINMAKERS

Mailing Address P.O. BOX 1082
5211 PORT ROYAL ROAD

City SPRING HILL State TN Zip Code 37174

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
04	04	2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.30237

Category/
Type

Full Name (Last, First, Middle Initial)

C. THE RAINMAKERS

Mailing Address P.O. BOX 1082
5211 PORT ROYAL ROAD

City SPRING HILL State TN Zip Code 37174

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
04	04	2014

Amount of Each Disbursement this Period

9424.00

Transaction ID : SB17.30238

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

12298.90

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. THE RAINMAKERS

Mailing Address P.O. BOX 1082
5211 PORT ROYAL ROAD

City SPRING HILL State TN Zip Code 37174

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Amount of Each Disbursement this Period

3431.70

Transaction ID : SB17.30239

Full Name (Last, First, Middle Initial)

B. THE RAINMAKERS

Mailing Address P.O. BOX 1082
5211 PORT ROYAL ROAD

City SPRING HILL State TN Zip Code 37174

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

7194.71

Transaction ID : SB17.30240

Full Name (Last, First, Middle Initial)

C. THE ROOSEVELT NEW ORLEANS HOTEL

Mailing Address 130 ROOSEVELT WAY

City NEW ORLEANS State LA Zip Code 70119

Purpose of Disbursement
TRAVEL: LODGING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

209.70

Transaction ID : SB17.30490

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

10836.11

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. THE SIGN MAN

Mailing Address 10016 NAVARRE PKWY.

City NAVARRE State FL Zip Code 32566

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Amount of Each Disbursement this Period

12500.00

Transaction ID : SB17.30317

B. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Amount of Each Disbursement this Period

1533.37

Transaction ID : SB17.30271

C. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

453.36

Transaction ID : SB17.30272

SUBTOTAL of Disbursements This Page (optional)

14486.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

245.94

Transaction ID : SB17.30273

B. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Amount of Each Disbursement this Period

546.24

Transaction ID : SB17.30274

C. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

375.70

Transaction ID : SB17.30275

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1167.88

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. TRANSAXT

Mailing Address 190 MONROE AVE NW
STE 500

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

192.93

Transaction ID : SB17.30276

Full Name (Last, First, Middle Initial)

B. TRI-STATE ENVELOPE CORPORATION

Mailing Address PO BOX 443

City BELTSVILLE State MD Zip Code 20704

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

3381.61

Transaction ID : SB17.30566

Full Name (Last, First, Middle Initial)

C. UNCLE BUCKS GRILL

Mailing Address 100 BASS PRO DRIVE

City PEARL State MS Zip Code 39208

Purpose of Disbursement
ROSE: TRAVEL: FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

11.94

Transaction ID : SB17.30348

(MEMO ITEM)

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3574.54

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2014

Amount of Each Disbursement this Period

1963.78

Transaction ID : SB17.30503

Category/
Type

B. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Amount of Each Disbursement this Period

60.15

Transaction ID : SB17.30506

Category/
Type

C. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Amount of Each Disbursement this Period

4010.00

Transaction ID : SB17.30507

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

6033.93

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Amount of Each Disbursement this Period

14.40

Transaction ID : SB17.30508

B. USPS

Mailing Address 401 E SOUTH ST

City JACKSON State MS Zip Code 39201

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2014

Amount of Each Disbursement this Period

147.00

Transaction ID : SB17.30205

C. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2014

Amount of Each Disbursement this Period

814.09

Transaction ID : SB17.30509

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

975.49

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

152.47

Transaction ID : SB17.30514

B. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

10164.71

Transaction ID : SB17.30515

C. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

7.20

Transaction ID : SB17.30516

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

10324.38

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 16 / 2014

Amount of Each Disbursement this Period

277.69

Transaction ID : SB17.30517

Category/
Type

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

124.93

Transaction ID : SB17.30518

Category/
Type

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

8329.37

Transaction ID : SB17.30519

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

8731.99

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 13755 SUNRISE VALLEY DR
STE 450

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 17 / 2014

Amount of Each Disbursement this Period

14.41

Transaction ID : SB17.30520

B. USPS

Mailing Address 401 E SOUTH ST

City JACKSON State MS Zip Code 39201

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2014

Amount of Each Disbursement this Period

196.00

Transaction ID : SB17.30206

C. USPS

Mailing Address 401 E SOUTH ST

City JACKSON State MS Zip Code 39201

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Amount of Each Disbursement this Period

512.38

Transaction ID : SB17.30569

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

722.79

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2014

Amount of Each Disbursement this Period

1.83

Transaction ID : SB17.30277

B. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2014

Amount of Each Disbursement this Period

4.34

Transaction ID : SB17.30278

C. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2014

Amount of Each Disbursement this Period

0.59

Transaction ID : SB17.30279

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

6.76

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

2.90

Transaction ID : SB17.30280

Full Name (Last, First, Middle Initial)

B. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

1.83

Transaction ID : SB17.30281

Full Name (Last, First, Middle Initial)

C. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2014

Amount of Each Disbursement this Period

3.20

Transaction ID : SB17.30282

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

7.93

14020400559

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

1.14

Transaction ID : SB17.30283

B. VANCO SERVICES

Mailing Address 12600 WHITEWATER DRIVE
SUITE 200

City MINNETONKA State MN Zip Code 55343

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Amount of Each Disbursement this Period

0.59

Transaction ID : SB17.30284

C. VIDEO IMAGE PRODUCTIONS

Mailing Address P.O. BOX 16371

City HATTIESBURG State MS Zip Code 39404

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2014

Amount of Each Disbursement this Period

312.50

Transaction ID : SB17.30303

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

314.23

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. VOTER GRAVITY INC

Mailing Address 121 E MAIN STREET

City State Zip Code
PURCELLVILLE VA 20132

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2014

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.30342

Full Name (Last, First, Middle Initial)

B. VOTER GRAVITY INC

Mailing Address 121 E MAIN STREET

City State Zip Code
PURCELLVILLE VA 20132

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.30343

Full Name (Last, First, Middle Initial)

C. VOTER GRAVITY INC

Mailing Address 121 E MAIN STREET

City State Zip Code
PURCELLVILLE VA 20132

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

862.50

Transaction ID : SB17.30344

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

3562.50

14020400561

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. VOTER GRAVITY INC

Mailing Address 121 E MAIN STREET

City State Zip Code
PURCELLVILLE VA 20132

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.30345

Full Name (Last, First, Middle Initial)

B. DAWN WALTERS

Mailing Address 152 MONARCH RD

City State Zip Code
OVETT MS 39464

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.30145

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.30510

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
CAGING AND ESCROW

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

816.51

Transaction ID : SB17.30511

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2014

Amount of Each Disbursement this Period

7.24

Transaction ID : SB17.30512

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.30523

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1073.75

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2014

Amount of Each Disbursement this Period

42.00

Transaction ID : SB17.30534

Category/
Type

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2014

Amount of Each Disbursement this Period

515.15

Transaction ID : SB17.30571

Category/
Type

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
CAGING AND ESCROW

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

600.85

Transaction ID : SB17.30558

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1158.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151

Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2014

Amount of Each Disbursement this Period

11.61

Transaction ID : SB17.30559

B. TIMOTHY WELLS

Mailing Address P.O. BOX 125

City State Zip Code
LAUREL MS 39441

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.30137

C. TIMOTHY WELLS

Mailing Address P.O. BOX 125

City State Zip Code
LAUREL MS 39441

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

1106.58

Transaction ID : SB17.30138

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1368.19

14020400565

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
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NAME OF COMMITTEE (In Full)
FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. HALEY WINNINGHAM

Mailing Address 907 SIMPSON HWY 149

City State Zip Code
MAGEE MS 39111

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.30149

Category/
Type

Full Name (Last, First, Middle Initial)

B. RJ YOUNG

Mailing Address P.O. BOX 40623

City State Zip Code
NASHVILLE TN 37204

Purpose of Disbursement
TECHNOLOGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2014

Amount of Each Disbursement this Period

712.51

Transaction ID : SB17.30126

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2712.51

527114.64

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (in Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MARY OKEEFE CULTURAL CENTER

Mailing Address 1600 GOVERNMENT ST

City OCEAN SPRINGS State MS Zip Code 39564

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2014

Amount of Each Disbursement this Period

355.00

Transaction ID : SB20A.30593

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

355.00

355.00

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 237 OF 238

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Transaction ID : SC/10.10215

LOAN SOURCE Full Name (Last, First, Middle Initial)

CHRISTOPHER BRIAN MCDANIEL

[PERSONAL FUNDS]

Election: 2014

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

506 SOUTH COURT ST

City

State

ZIP Code

ELLISVILLE

MS

39437

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100.00

0.00

100.00

TERMS

Date Incurred

M M / D D / Y Y
10 07 / 2013

Date Due

M M / D D / Y Y
12/31/2014

Interest Rate

0.00

% (apr)

Secured:

☐ Yes

☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)...

TOTALS This Period (last page in this line only)...

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

100.00

14020400568

SCHEDULE C (FEC Form 3)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 238 OF 238

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Transaction ID : SC/10.10216

LOAN SOURCE Full Name (Last, First, Middle Initial)

CHRISTOPHER BRIAN MCDANIEL

[PERSONAL FUNDS]

Election: 2014

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address

506 SOUTH COURT ST

City

State

ZIP Code

ELLISVILLE

MS

39437

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

M 10 / D 15 / Y 2013

Date Due

M / D / Y 12/31/2014

Interest Rate

0.00

% (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)...

100000.00

TOTALS This Period (last page in this line only) ..

100100.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7111
PHONE (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 5-22-14
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:
SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

☐

UPS _____

☐

DHL _____

☐

AIRBORNE EXPRESS _____

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

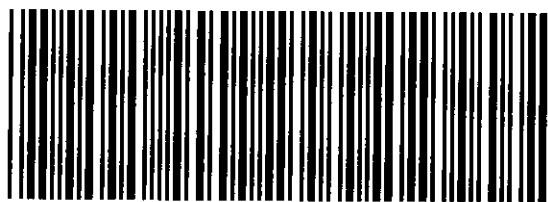
PREPARER

DH

DATE PREPARED

5-22-14

14020400570



SEN PATCH



SEN PATCH

14020400571